



An Evaluation of the COPS Office Methamphetamine Initiative



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An Evaluation of the COPS Office Methamphetamine Initiative

Introduction

In 1998, the Office of community Oriented Policing Services (COPS Office), U.S. Department of Justice, provided almost \$4.5 million to six carefully selected cities in the United States to address the methamphetamine problem in their areas. Through community policing principles and partnerships among law enforcement and community agencies, the jurisdictions aim to contain and reduce the problem of methamphetamine abuse.

At the initiation of these grants, the COPS Office also solicited proposals to evaluate the implementation and impact of the local efforts. The Institute for law and Justice, Inc., in partnership with 21st Century Solutions, received the grant award after a competitive process (Grant Number 98-CK-WX-K058).

This interim evaluation report describes the progress of efforts in the six cities: Phoenix, Arizona; Salt Lake City, Utah; Dallas, Texas; Oklahoma City, Oklahoma; Little Rock, Arkansas; and Minneapolis, Minnesota.

In preparation of the report, staff and consultants made at least three visits to each jurisdiction during 1999 and the first quarter of 2000. During these visits, the evaluators conducted interviews with key personnel from police department and appropriate partner agencies. They also observed activities of law enforcement officers, attended key meetings, and collected data on methamphetamine lab seizures, drug arrests, and criminal cases filed. In addition, ADAM data were collected from participating cities.

The interim evaluation report is organized in the following manner. Each site coordinator or team has prepared a brief chapter about their site. To provide consistency across sites, each chapter includes a brief description of the site and a discussion of the efforts expected through the local initiative based on the grant applications to the COPS Office. The next sections include a history of the nature and scope of the methamphetamine problem, a description of the

partnerships, and an examination of drug market dynamics. For each site, we also describe law enforcement interventions, treatment and prevention efforts, community policing activities, and other issues affected the program at the site.

At this point in the evaluation, we did not attempt to reach final conclusions about the programs. Any errors of fact, omission, or interpretation are those of the authors and are not the responsibility of the COPS Office, or the police agencies and their partners.

The Meth Initiative in Phoenix

Susan Pennell

Background and Site Description

The City of Phoenix within Maricopa County, is the largest city in the State of Arizona. The City, based on population forecasts, has over a million residents, with the larger metropolitan area comprised of another million residents. The City of Phoenix is the fourth largest in the country. Over 70 percent of the City and the larger surrounding area residents are white. About 1 in 5 residents is Hispanic and Blacks represents about five percent of the population. Similar to other large metropolitan cities, major crimes in Phoenix have dropped over the past several years although drugs continue to plague the city. At the time the grant was written, meth was rated as the fourth most abused drug after alcohol, marijuana, and crack cocaine. Other observations about meth in the grant proposal included the following: A total of 141 meth labs were seized in the first nine months of 1998, primarily in the urban areas. About three-quarters of the meth suppliers in the area were local independent groups, 20 percent were undocumented persons, and five percent were associated with biker groups.

The Meth Initiative

The Phoenix effort to address meth through COPS Office funding is directed toward prevention and enforcement. The enforcement effort is housed in the Drug Enforcement Bureau (DEB) of the Phoenix Police Department, a specialized drug unit located offsite from central headquarters. A partnership was forged with TASC, Inc., (Treatment Assessment Screening Center), a long-time leader in the community that provides drug abuse prevention, education, detection, and treatment services. TASC has a drug-free workplace component within its array of services and also provides assistance to the criminal courts for drug diversion cases.

The Phoenix grant proposed to conduct an innovative methamphetamine initiative incorporated within a community policing philosophy to include:

- a supplementary law enforcement component,
- a drug-free workplace initiative,
- a non-traditional media campaign to educate the public about the dangers and consequences of meth use and production, and
- a methamphetamine data base study.

Each of these efforts is described below in more detail.

Enforcement

The enforcement effort, according to the grant, expected to solicit businesses to partner with the project and train store clerks to recognize the purchasing practices of meth producers buying precursor supplies and develop linkages to report such information. This effort was abandoned to some extent when it was learned that the Maricopa County HIDTA Meth Task Force was embarking on a similar effort with business owners. With approval by the COPS Office, the project re-directed this effort to educate and inform diverse groups in the community about meth lab identification and the consequences of mixing potentially volatile chemicals.

The enforcement feature also included maintaining positive and frequent interaction with the Community Action Officers within each of the six police precincts and encouraging these officers to identify community groups and organizations that would benefit from presentations about the dangers of meth production and use. The project manager would also attend briefings in each precinct to inform patrol officers of the ways that the Meth Initiative can provide assistance to officers, (e.g., how to identify chemicals and equipment associated with meth production). The project also expected to develop databases that would provide linkage analysis regarding meth producers and distribution and thus enhance intelligence gathering efforts. Specifically, a questionnaire was to be administered to all burglars arrested by area detectives. Questions would focus on the association of property crimes and drug use. Data would be entered into a linkage data base used by analysts to identify criminal associates and possible leads for further investigation. Another type of analysis that was to take place was the examination of all narcotics complaints associated with meth directed to the DEB. Subsequent to data entry and analysis, a profile of targets and areas would be developed for further investigations.

Finally, with respect to the law enforcement effort, specific equipment relative to meth lab investigations was requested, including a gas chromatograph/mass spectrometer for the department's crime lab to affirm meth evidence; along with training for DEB investigators by U.S. Customs to investigate hidden compartments in vehicles used to secure illegal drugs. The effects of the law enforcement component were intended to result in more labs seized and more suspects arrested and prosecuted. For prosecution purposes, the project also intended to contract with a County Attorney to be assigned to meth cases only.

Drug-Free Workplace

Utilizing the experience and expertise of their partner, TASC, Inc., the project hoped to work with local large and small businesses to encourage and design a five-step drug-free workplace. Objectives would include educating employers about employee drug use, employer liability, treatment alternatives, drug screen alternatives, and benefits of having a drug-free workplace.

Media Campaign

TASC collaborates with ONDCP on their anti-drug campaign. With the project manager, TASC staff would explore unique types of media to attract the public's attention to meth and provide informational materials and phone contacts to link the public with appropriate intervention agencies.

Database Development

This component includes the linkage software described above and not only includes the results from interviews with burglars, but additionally a compilation and analysis of narcotics complaints emanating within the DEB from calls from the public and other agencies. Review of the information was expected to assist in identification of threat areas or targets.

An additional data analysis effort included interviews with a sample of adults and juveniles booked into local jails to develop a profile of the meth user and identify use trends and possible treatment alternatives. This effort is a replication of the ADAM process, or Arrestee Drug Abuse Monitoring system, supported by the National Institute of Justice (NIJ). This program identifies a sample of booked arrestees and asks questions about their drug use. A

parallel study, conducted by the San Diego Association of Governments and also funded by NIJ, supplemented the regular interview with 60 additional questions directed to meth users (Pennell, et al., 1999). The TASC staff intended to use a similar approach to develop a picture of meth users in Phoenix.

Evaluation

The evaluation design required a number of site visits and semi-structured interviews with local stakeholders. The interviews with representatives from diverse disciplines served primarily to determine the history of meth production and use, to identify prevention, intervention, and enforcement efforts to address meth, and describe the progress of implementation of the COPS Meth Initiative. In addition, data sources were identified that could describe the nature and scope of the meth problem over time, as well as provide measures for determining the effects of the Meth Initiative. A number of other sources were reviewed as well, covering such topics as legislation associated with meth, reports by the legislature, local ordinances, newspaper articles, studies about drug use, educational materials, etc. Also reviewed were monthly reports by the project manager of the COPS Meth Initiative and monthly reports by TASC to the project manager.

The remainder of this report describes information gained during three site visits within a 10-month period (March 1999 – January 2000).

History of Meth and Meth Market Dynamics

To date, interviews have been conducted with over 40 individuals representing a wide array of agencies and disciplines, including law enforcement (federal, state, and local), probation, prosecution, the judiciary, schools, medical examiner, health services, drug treatment providers, crime labs, and the State Attorney General's Office. In all instances, respondents were queried about the history of meth with respect to users, producers, and distributors. Additionally, questions were raised about the types of interventions taking place and those that *should* occur in the areas of prevention, enforcement, treatment, interdiction, etc. Respondents also addressed the “stage” or “status” of meth use at the time of the interview according to phases of an epidemic.

Methamphetamine use is not a new phenomenon in Phoenix. The first meth lab was found in 1990. What *was* new in the mid-90s was the surge in the number of meth producers and the rise in use. In 1996, 65 labs were seized. By 1999, that number rose to 116. Currently, the Drug Enforcement Bureau of the Phoenix Police Department seizes 2 to 3 labs per week.

Historically, producers of meth were motorcycle groups, many transplanted from California. At first, meth cookers were mostly White, blue collar groups producing sufficient amounts of meth for their own use as well as enough to sell to support the purchase of chemicals needed to cook more meth. Today (February 2000), meth production is still associated with Whites, although the economic spectrum has widened. Most labs use the ephedrine or pseudo-ephedrine reduction method of cooking, utilizing makeshift labs that can be disassembled quickly and moved to other sites. No one believes that the biker groups are out of the meth business. On the contrary, a small proportion of meth manufacturing is attributed to them, purported to be the “best meth cookers”. What sets them apart is their relative sophistication in manufacturing. They tend to reside in more rural areas of Arizona, obtain their chemicals from companies on the East Coast, and distribute large amounts of meth out of state. These tactics make them less visible to law enforcement.

Another group of meth cookers and users are the Mexican Nationals although they are rarely involved in lab seizures. Law enforcement has speculated that the reasons for this are twofold. First, ephedrine is not regulated in Mexico and some meth is being produced in that country and then transported across the border for distribution statewide as well as other parts of the country. More likely involvement by undocumented persons is that of transporting from Mexico the chemicals used to make meth such as iodine and red phosphorous and then producing it in this country since the penalties are much less severe than in Mexico. This results in purer methamphetamine. Difficult to infiltrate are the Mexican cartels that traditionally were involved in cocaine trafficking, but have recognized the demand for meth in this country and have in place the organization and structure for a high level drug trade business. The scope of their involvement is difficult to ascertain.

In contrast, among Whites, meth production is less structured and poorly organized. Yet a definite network exists among the suppliers of the precursor chemicals which are quite prevalent. Informants in this study suggest that for just \$200, an individual can purchase

equipment and sufficient amounts of chemicals to cook \$1,000 worth of meth (an ounce). The surge in incidence and prevalence of meth have made it the primary drug among users of illegal drugs, surpassing heroin and cocaine, according to those interviewed. However, drug trafficking of cocaine and marijuana across the border continues at high levels, based on a lengthy series of articles in the Arizona Republic newspaper in January 2000.

Arrest statistics from the Phoenix Police Department indicate that 19 percent of all drug arrests in 1999 were in the dangerous drug category, which primarily is meth, but also includes synthetic drugs such as MDMA, Ecstasy, and other so-called “club” or “rave” drugs. Ninety-five percent (95 %) of the adults arrested in this category were White, compared to 78 percent of the heroin and cocaine users.

Differences in meth users and dealers, in contrast to users of other drugs, suggested in the five-city study of meth users, were confirmed in interviews with Phoenix respondents. That is, the drug market, although less organized, is not as visible. Individuals, for the most part, buy and sell to persons they know, rather than strangers. Meth transactions generally take place indoors.

By January 2000, Phoenix informants adamantly believed that the meth problem is reaching epidemic proportions in their city and will get worse before it gets better. Suggestions about the types of interventions that must take place to curb the rise of meth are discussed at the end of this report.

Other Indicators of Meth Use

The Community Epidemiology Work Group (CEWG), supported by the U.S. Department of Health and Human Services, under the auspices of the National Institute of Drug Abuse (NIDA), represents a network of researchers in diverse fields from metropolitan areas, who meet bi-annually to discuss drug abuse trends among population sub-groups.

The June 1999 CEWG report suggests that there is “great variability in methamphetamine patterns and contexts of use, depending on population, location, and history of use” (Dept. of Health and Human Services, June 1999). Mortality data that links death to methamphetamine show that from 1997 to 1998, deaths rose from 15 to 48 in Phoenix, one of three cities to show an increase. Phoenix, following San Francisco and San Diego, had the third highest rate per

100,000 of emergency mentions involving methamphetamine, in mid-1998. However the 1998 rate decreased by 36 percent from the previous year after a steady rise since 1993. Drug treatment admissions for methamphetamine in Hawaii, Phoenix, and San Diego outstripped admissions for all other drugs, according to the CEWG report. The ADAM (Arrestee Drug Abuse Monitoring) data strongly indicate that methamphetamine use among arrestees remains primarily in the West, with San Diego showing the highest proportion of arrestees with positive urinalysis results, followed by Phoenix. With the exception of labs springing up sporadically in rural areas of the mid-west and northeast and some meth use noted among certain sub-groups, the Western part of the United States remains the dominant source for production and use of methamphetamine.

Interventions

To place the COPS Meth Initiative in perspective, it is helpful to describe the overall drug control strategy within the state of Arizona and the efforts taking place prior to the COPS Meth Initiative. In the mid-90s, indicators of drug use soared in the state, specifically methamphetamine. The Governor developed a Drug Control Strategy that, among other directives, required the Arizona National Guard to devote a significant amount of resources to the prevention and control of illegal drugs. Guardsmen and women were assigned to various agencies to perform a variety of tasks, such as assisting the border patrol and local law enforcement to stem the tide of drugs transported across the border. With no enforcement authority, the Guard personnel became additional resources. In the Drug Enforcement Bureau of the Phoenix Police Department, nine National Guard staff are assigned to analyst positions, responsible for responding to complaints (by phone) and analyzing data on locations and suspects to provide to the investigators for follow-up. Another section of the Guard in Phoenix provides an extensive drug abuse prevention and education component that develops materials (e.g., videos, posters, bookmarks, bumper stickers, etc.) and conducts presentations to schools and community groups about the consequences of substance abuse. In the past couple of years, their emphasis is primarily on meth. A website has been established (www.antimeth.org). According to the Guard Administrators, they receive hundreds of requests from around the world.

Also, in the mid-90s, the Governor established a number of HIDTA (High Intensity Drug Trafficking Areas) Task Forces around the state to focus primarily on meth. In Maricopa County, the authority for the HIDTA rests jointly with the DEA and the Sheriff and is comprised of law enforcement personnel from other municipalities as well as representatives from the State Attorney General's Office. A primary role of the HIDTA is the investigation and seizure of meth labs. As noted earlier, in early 1999, the HIDTA directed additional efforts toward retailers and wholesalers of businesses where precursor chemicals can be purchased. Business owners and staff were educated about the ingredients used to make meth and the ordinances regarding the restrictions on the amounts that can be sold at one time. The HIDTA efforts are inclusive of Maricopa County, covering over 9,000 square miles with over 20 municipalities. The Phoenix Police Department, by contrast, serves only the city but about half of the population of the entire county with a sworn complement of just over 2,600 officers. The HIDTA Meth Task Force also coordinates its efforts with the US Attorney General's Interagency Meth Task Force.

The Drug Enforcement Bureau (DEB) has six squads that interact with the Community Action Officers in six police precincts. Another squad, "Knock and Talk" conducts investigations citywide. An additional squad has sole responsibility for conspiracy and wiretap investigations related to drug trafficking. The 64 DEB investigators are housed in an isolated, industrial location with some DEA agents and the National Guard analysts.

A DEB investigator is a member of the HIDTA Meth Task Force. Many of the efforts undertaken by the DEB as part of the COPS Meth Initiative took place in collaboration and partnership with the HIDTA group.

Partnership Efforts

In the early months of the COPS Meth Initiative, considerable time was spent on securing the Memorandum of Understanding (MOU) with the TASC partner, the County Attorney's Office, and ordering the equipment specified in the grant. Each of these tasks required interaction with a number of city and county agencies.

Training for the crime lab technician in the new laboratory equipment was set up and steps were initiated with U. S. Customs to train the DEB agents investigate trap compartments in

vehicles in which drugs are hidden. The Project Manager became certified to teach Hazardous Materials courses.

Regular contact with TASC staff occurred and the Project Manager also discussed the Meth Initiative with the Arizona National Guard staff who offered their support and resource materials for prevention and education purposes.

Between June and December 1999, the trap compartment training occurred, the lab technician received training in the new lab equipment, the County Attorney came on board to focus on meth prosecutions, and the Project Manager provided 17 presentations to 554 citizens. Most unique of these were presentations to the employees of the Salt River Project (power company) and to staff of the Arizona Public Sanitation Department. The Project Manager described the types of equipment used to make meth as well as the kinds of chemicals and waste that could be found at a lab site. The premise is that power employees checking meters and sanitation workers picking up trash have unique opportunities to uncover evidence of meth labs and report such information to law enforcement.

In addition, the Project Manager gave presentations to the Community Action Officers in the six police precincts. The purpose of these was to not only describe information about meth labs, but to encourage the police officers to identify specific community groups that could benefit from such information. A presentation was also made to supervisors in the Arizona Public Safety Agency. Probation officers were also provided presentations and the Project Manager also talked with a pharmacology class at Arizona State University. Included in the public presentations were school classrooms in middle schools.

The methamphetamine questionnaire for use by burglary detectives was completed and work began on a booklet about methamphetamine and its effects and consequences. Also, analysis training was provided by DEA to the DEB agents and analysts to assist them in interpreting the complaint forms called in by residents for the purpose of identifying hotspots and targets. Collaborative efforts and information sharing continued with the National Guard, the HIDTA Meth Task Force, and the precinct community action officers. The project developed and complete a meth video, entitled *Meth-Unsafe at Any Speed*. The video featured a number of stakeholders in the City and County speaking about the dangers of meth along with graphic displays of meth labs and chemicals used for cooking. Finally, a booklet about meth labs and

consequences of meth use was produced by the project and reviewed by a number of different agencies' staffs. At the January site visit, the project manager retrieved the final proof from the printer and was preparing to have 4,000 copies printed for distribution to various community groups.

FAX Net 1, the water billing process in Phoenix has been used to invite the public to a "Meth and Kids Open Forum" co-sponsored by the police department and the State Attorney General's Office in October 1999.

Historically, the State Attorney General's Office has prosecuted most methamphetamine lab cases, and this remains true as of this writing. The County Attorney's Office processes the drug sales and possession cases prioritized along with other cases in that office. The Meth Initiative called for a dedicated prosecutor to attend to only meth cases. Delays occurred in the contracting process and the prosecutor was on board in September 1999 with the first meth case prosecuted in October. In the last three months of 1999, this prosecutor filed charges against 48 meth dealers and users. The prosecutor indicated the State Attorney would continue to handle those cases involving labs. The use of a dedicated prosecutor in the County Attorney's Office was expected to expedite the case flow and ensure prosecution.

Non-Traditional Media Campaign

With their partner TASC, a cornerstone of the COPS Meth Initiative in Phoenix is that of public education using innovative strategies. With the hiring of staff specifically dedicated to this effort, a number of unique efforts took place, between June and December.

A visit to San Diego resulted in permission to utilize the wording on a billboard stating "What's Cookin' in Your Neighborhood? METH"? followed by instructions to call the meth hotline number to report users, dealers, labs, or other information. TASC staff worked with the various partners and the billboard company and secured, free-of-charge, 20 billboards within the city that contained the meth message. The partners included the Phoenix Police Department, TASC, Inc., the Maricopa METH Task Force, and the Arizona Partnership for a Drug-Free America, and the Department of Justice COPS Office. A press conference was held in August to announce the billboards with participation by the police department, the Sheriff, the Mayor's

Office, and others. Subsequent to the media coverage about the billboards, calls to the hotline number soared.

Another non-traditional media campaign was supported by the two major super markets in Phoenix: Basha's and Safeway. Through the efforts of TASC, Inc. staff, both market chains agreed to place the same billboard ad on their grocery bags. In late fall of 1999, Basha's agreed to print 2.3 million bags with the message and Safeway planned to have 400,000 bags by January.

A unique media tactic was the development of 25,000 postcards with the same message as the billboard on one side and facts about meth on the other side. The postcards were distributed to all "Video-to Go" stores in the Phoenix. The video stores agreed to place the postcards in with each rental.

A final approach involved the use of an ad in the movie theaters. The AMC theater company agreed to place a promotional advertisement about having a drug-free workplace in their theaters for a 13-week period for a cost of about \$100 per week. The theater company was adamant about not presenting any negative messages about drug use to their customers.

Drug Free Workplace Efforts

TASC, Inc. staff hired staff to design and implement a plan for drug free workplaces. To this end, a number of business groups were contacted initially through correspondence. Letters explained the benefits of developing the framework for a drug free workplace. Brochures were printed and incorporated with invitations to employees to host a presentation by TASC, INC. staff. Targeted employers included listings of hotel and motel owners and car rental managers.

Staff attended a number of community fairs and seminars and provided prevention and educational materials about drug abuse. Staff also met with the National Guard and attended the Meth Strike Force monthly meetings.

By December 1999, a sample of adult males and females booked into jail in two quarters were interviewed using the meth interview. Discussions were underway to obtain approval to conduct similar interviews with juveniles.

During 1999, the TASC, Inc., dedicated to the Meth Initiative turned over twice so that efforts were slowed somewhat as individuals left and new staff was hired.

Summary

It is too early to gauge the impact of the Phoenix Meth Initiative in spite of the many and varied efforts that have take place, primarily in the areas of prevention and public education. Review of indicators from 1998 to 1999 show the following:

- Overall drug arrests and arrests for dangerous drugs declined in the Phoenix Police Department as did drug arrests by the Drug Enforcement Bureau.
- Narcotic complaints to the Drug Enforcement Bureau also decreased.
- Seizures of meth labs increased, by the DEB, as well as by the HIDTA Meth Task Force.

The health indicators lag behind the justice information so that no data are available for 1999. Still being explored are filings by the County Attorney and drug court data.

Probably the best measure to link to the activities of the Meth Initiative would be that of a citizen survey to determine increased awareness about the meth issue through billboards, postcards, presentations, etc.

When asked what steps should be taken to stem the production and use of meth in Arizona, the following suggestions and observations were offered.

- Public attitudes about drug abuse need to be altered. Too many folks believe abuse is only the users' problem as well as their prerogative. The media could educate, but only report sensational events, e.g., labs blowing up.
- Penalties are not swift and certain. Lab cooks tend to get probation if convicted.
- Availability could be curtailed by increased restrictions on precursor chemicals. Even the new restrictions allow large amounts of chemicals to be purchased without mandated reporting.
- Treatment is virtually non-existent in Arizona due to managed care that mandates the number of days that can be paid. A recent news article stated that there are only 12 residential beds for juveniles in the entire state of Arizona.
- Recently, the State Attorney General issued an edict requiring law enforcement to contact Child Protective Services when labs are seized in locations in which

children are present. The policy suggests that children should be removed and tested for inhalation of toxic chemicals. According to law enforcement, the social service agencies are reluctant to take any steps that might separate parents from their children.

References

U.S. Department of Health and Human Services. *Epidemiological Trends in Drug Abuse, V. 1 Proceedings of the Community Epidemiology Work Group*. National Institute of Drug Abuse, Bethesda, Maryland, June 1999.

Pennell, Susan, and Cynthia Rienick, Joe Ellet, Jackie Grimes. *Meth Matters: Methamphetamine Use in Five Western Cities*. National Institute of Justice, Office of Justice Programs, May 1999.

The Meth Initiative in Salt Lake City

J. Thomas McEwen

Stacy L. Osnick

Introduction

The purpose of the Methamphetamine Initiative in Salt Lake City is to utilize a system-wide approach to combat the methamphetamine problem both in the Salt Lake City area and in the surrounding communities. This multi-agency approach is demonstrated in the four subcommittees that have been formed through the Methamphetamine Initiative. They are: 1) Law Enforcement; 2) Child Endangerment; 3) Enhanced Prosecution & Nuisance Abatement; and 4) Public Awareness & Training. Ideally, these subcommittees are to provide their area-specific expertise into the handling and processing of methamphetamine-related issues and to work with other agencies to achieve the overall objective of improving the quality of life in Salt Lake City.

In total, more than 30 agencies are participating in the Salt Lake City Methamphetamine Initiative with the Salt Lake City Police Department (SLC PD) as the primary agency. A Partner's Work Group has been formed and is comprised of administrative personnel from participating agencies. This group meets once per month to discuss the recent activities of the subcommittees and any other important news related to the Initiative. There is also a Meth Team physically located at the SLC PD, which unlike the PWG, consists of actual employees of the participating agencies. Their roles involve responding to cases, following up on cases, and other work that is consistent with their job description.

Evaluation

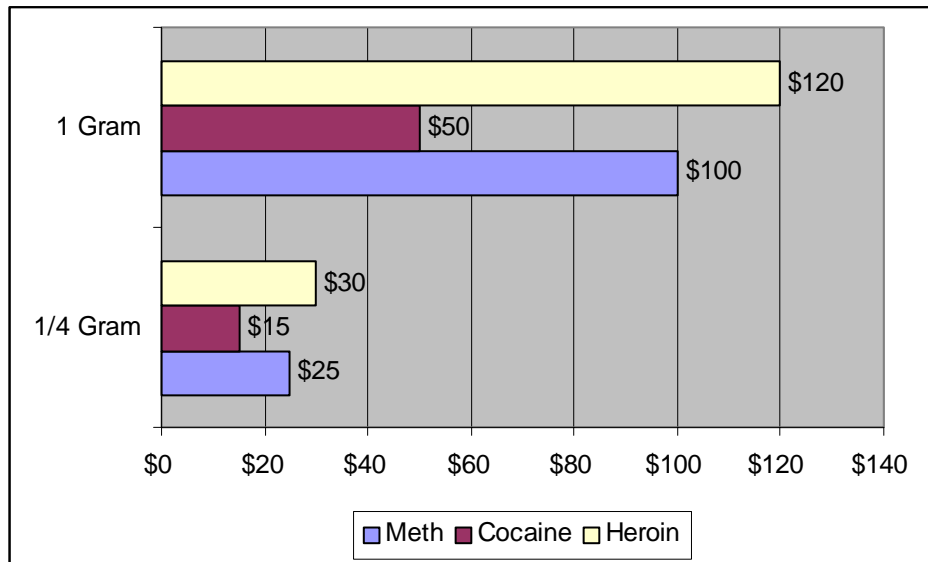
The evaluation effort for Salt Lake City's Methamphetamine Initiative is multifaceted. Because this particular program is large and dynamic, it is expected that site visits will be scheduled approximately every six to eight weeks until the conclusion of project funding. Four separate site visits will focus on the four subcommittees in Salt Lake City's Meth Initiative. Each of these visits will entail interviews with key agency personnel and subcommittee-specific data collection. Other site visits will focus on collecting data from other sources such as interviews with drug court participants and arrestees; scheduled ride-alongs with narcotics officers working under the Initiative; observation of the Dependency (Family) Drug Court and the Adult Drug Court; and participation in the Partner's Work Group Meetings.

History of Meth and the Meth Market

The drug problem in Salt Lake City is a serious one, especially with the yearly increase of methamphetamine as the drug of choice on the street. Interviews with Salt Lake City Police officials and state crime lab analysts revealed interesting trend information with regard to methamphetamine. One year ago, Salt Lake City ranked methamphetamine as the fifth most commonly abused substance (on a scale from 1-11). Those who are using meth are characterized as white males between 18 to 32 years of age, however white females are an increasing number. Methamphetamine is rarely found in the black community and Hispanic use is "way behind." It was also estimated that approximately 50 percent of methamphetamine suppliers in the area are local independent groups/gangs, 40 percent are illegal aliens, five percent are motorcycle gangs, and five percent are other. Below is a table that approximates the suppliers' street-level price for methamphetamine (Exhibit 1). Also charted below is the street price for methamphetamine relative to the price for cocaine and heroin (Exhibit 2). This information is updated by the SLCPD using information provided to them through undercover investigations or interviews with people who have knowledge of the meth market.

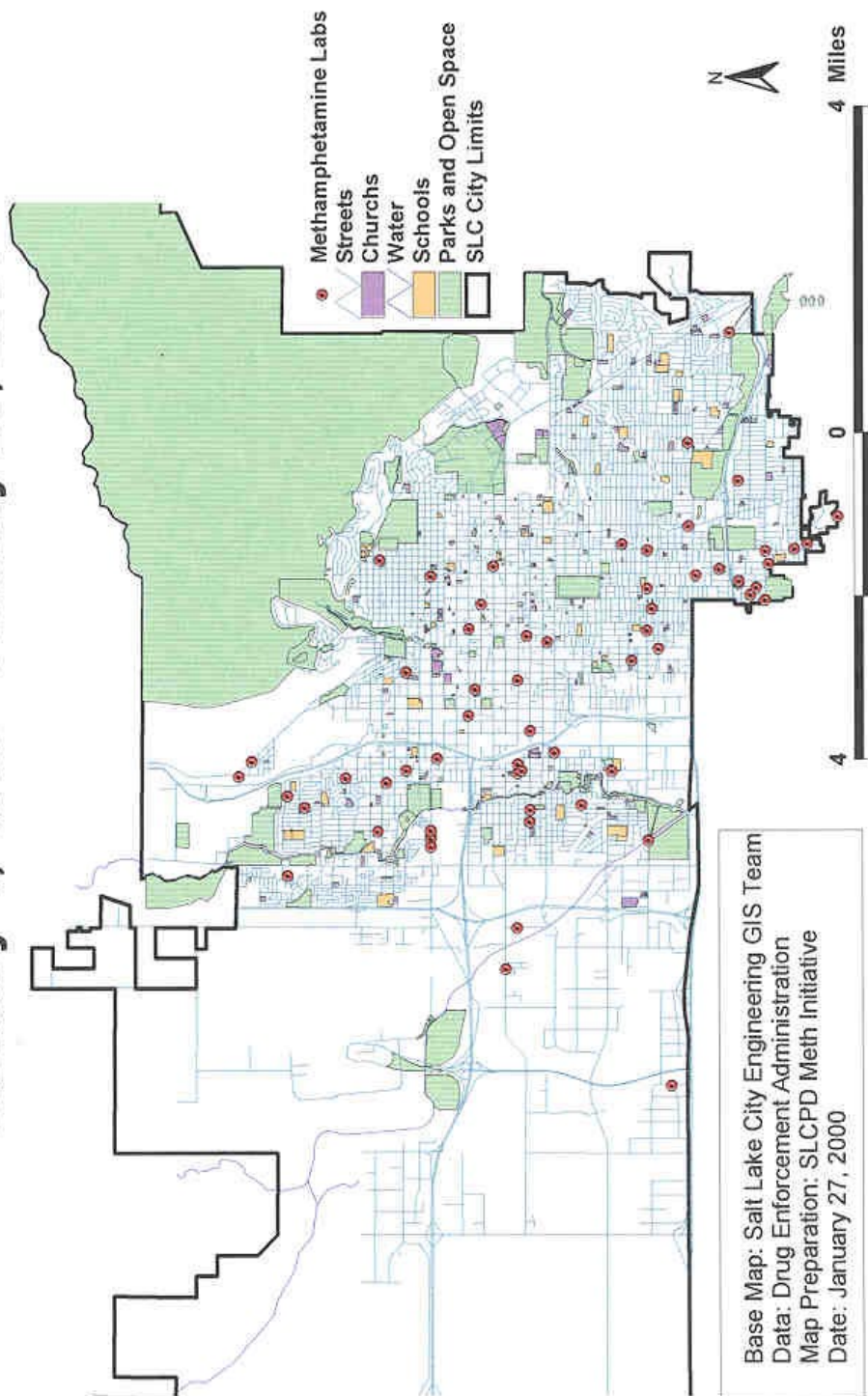
Exhibit 1: Salt Lake City Police Department Street Value of Methamphetamine

Methamphetamine	Retail	Wholesale
¼ gram	\$25	\$25
½ gram	\$50	\$30
1 gram	\$80-120	\$60
1/16 ounce (“Teener”)	\$110-150	\$80
1/8 ounce (“Eight ball”)	\$140-180	\$110
1 Ounce	\$700-900	\$550
1 Pound	\$10-12,000	\$7,000
1 Kilogram	\$18-22,000	\$9,000

Exhibit 2: Street Price of Methamphetamine, Cocaine, and Heroin


Clandestine labs in Salt Lake City and surrounding areas have been and continue to be small and used for the purpose of manufacturing methamphetamine for individual use or for a small group of friends. There were 25 lab seizures in a 9-month (January-September) period in 1998. The majority of labs were seized in urban areas (60%) and storage units (20%). According to the DEA, clandestine labs cost approximately \$3,000 to \$8,000 to clean up. A map showing the location of clandestine laboratories from January 1998 to January 2000 is attached.

Methamphetamine Labs Discovered in Salt Lake City **January 1, 1998 - January 20, 2000**



Partnerships

As with all agencies that have existed as independent entities for quite some time, there is some adjustment period necessary when inter-agency collaboration begins to take place. Several agencies involved in the Salt Lake City Methamphetamine Initiative did experience some complications when they began to form partnerships with others.

First, there were overlapping and sometimes conflicting responsibilities among agencies. One example of this involved the Youth and Family Specialists (YFS) located at the SLC PD and the Division of Child and Family Services (DCFS) worker assigned to the department. It appeared that these two entities were not clear of their roles with regard to first response, front-end assessments, child removal, and child placement. This problem has since been remedied with an official call-out protocol for officers to use while on duty. In addition, jurisdictional issues became a problem between some agencies. While the Meth Initiative in Salt Lake City has made great strides in correcting these problems, the beginning of the program saw very little interaction between SLC PD and the West Valley City Police Department (WV PD) and the DEA. There was also a visible separation between law enforcement agencies (e.g., the police department and the district attorney's office) and social resource agencies (e.g., Health Department, DCFS).

Despite these issues most participants now feel that inter-agency collaboration is a necessary and worthwhile effort to help combat the methamphetamine problem in Salt Lake City. Not only do people verbally advocate such a working relationship, but many of them also make special efforts to see that these alliances came to fruition. These efforts include:

- Calling out partnering agencies (i.e., DCFS, YFS, SLC HD, WV PD) to crime scenes to help with child, family, health, and law enforcement issues;
- Sharing intelligence information within the SLC PD (e.g., between the Narcotics Unit and Patrol) as well as with other law enforcement entities such as the neighboring West Valley City Police Department and the Drug Enforcement Administration (DEA);
- Organizing internal data on arrests as well as collecting data from outside agencies (e.g., DA's office, DEA, WV PD) in order to analyze the progress of the Initiative; and

- Cooperating with agencies like the SLC PD, the Salt Lake City/County Health Department, and the Utah Council on Crime Prevention to increase the public's awareness of methamphetamine problems.

For many participants in the Salt Lake City Methamphetamine Initiative, the establishment of cooperative relationships among agencies is seen as perhaps the biggest success. Now inter-agency cooperation is evolving to where agencies are welcoming needed expertise from other agencies. Many people believe that these newly established relationships will continue even after federal funding for the Methamphetamine Initiative ends.

Intervention

Intervention efforts have been a major focus of the Methamphetamine Initiative in Salt Lake City. This approach to fighting methamphetamine is significant given the seriousness of the meth problem in this area. From the outset of the program, Salt Lake City outlined strategies emphasizing intervention in the local methamphetamine market in order to reduce the number of methamphetamine users, sellers, and manufacturers. The Initiative is utilizing resources from several different agencies including law enforcement; city and county prosecutors; and child and adult protective services.

Law Enforcement

The role of law enforcement agencies in the Meth Initiative is quite extensive. Their strategies under the Initiative include enhancing law enforcement efforts to curtail the production, distribution, and abuse of methamphetamine; building methamphetamine cases using COP and problem solving skills; forming a Methamphetamine Intelligence/Investigations Unit; and coordinating with partners and community members to curtail production, distribution, and use in Salt Lake City and the surrounding communities.

Arrests

To give some indication of the law enforcement resources being spent on methamphetamine cases, the SLC PD and WV PD were asked to calculate and record their arrest statistics from 1998 to present. Arrests were recorded by type of drug and most serious offense so that a person with multiple drug charges would only be counted once. Therefore, data were

collected for 1) the total number of drug arrests for possession, sales, or manufacturing of any drug as well as 2) the total number of arrests for possession, sales, or manufacturing of methamphetamine (Exhibits 3 and 4).

Exhibit 3: Statistics For All Drug Arrests

	1998			1999		
	<i>Sales</i>	<i>Possession</i>	<i>Manufacturing</i>	<i>Sales</i>	<i>Possession</i>	<i>Manufacturing</i>
Salt Lake City PD	1238	1270	40	542	1132	27
West Valley City PD	17	568	9	14	511	40

Exhibit 4: Statistics For Methamphetamine Arrests

	1998			1999		
	<i>Sales</i>	<i>Possession</i>	<i>Manufacturing</i>	<i>Sales</i>	<i>Possession</i>	<i>Manufacturing</i>
Salt Lake City PD	38	98	29	26	102	14
West Valley City PD	*	*	*	0*	0*	39

*West Valley City Police Department is currently in the process of filtering out methamphetamine cases from the larger “all drugs” category in their files. Once this information is obtained, it will be included here.

Clandestine Lab Seizures

Clandestine lab information was also collected from the Salt Lake City Police Department and the West Valley City Police Department (Exhibit 5).

Exhibit 5: Clandestine Lab Seizures

	1998	1999	2000 (January 1-26)
Salt Lake City PD	18	12	3
West Valley PD	*	39	3

*West Valley City Police Department is currently in the process of filtering out methamphetamine cases from the larger “all drugs” category in their files. Once this information is obtained, it will be included here.

The Utah State Crime Lab provided additional clandestine lab information. This agency chemically tests substances found at clandestine laboratories in order to determine the nature of the lab (i.e., whether the lab was producing methamphetamine or some other substance). These tests are conducted in addition to testing done for all local agencies on any substance submitted to the crime lab for analysis including marijuana, cocaine, opiates, hallucinogens, and many more. Exhibit 6 shows the total number of samples that were tested by the crime lab and the percentage of those samples that were identified as methamphetamine.

Exhibit 6: Utah State Crime Lab Samples

	1998	1999	2000 (January 1-26)
Number of samples tested	14,176	14,713	431
Percent of samples identified as meth	27.7%	33.5%	23.4%

Additional state crime lab statistics include purity and weight information of a substance. In 1999, the Utah State Crime Lab worked on 72 methamphetamine cases.¹ Of the cases involving methamphetamine that were tested in the crime lab, the average percent purity of methamphetamine cases was 72 percent. Weight of the drug ranged from 0.1 gram to one kilogram with an average weight of 54.5 grams.

The Salt Lake City office of the DEA has agreed to submit their own arrest data (for all drugs as well as methamphetamine) and clandestine lab seizure numbers. This is especially important for clandestine lab information because the DEA is called to all clandestine lab sites by local law enforcement agencies. Therefore, the data that they report should have the most comprehensive lab seizure information. Due to an office relocation, there has been a small delay in obtaining this information and consequently it is not included in this interim report.

¹ The number of samples and the number of cases will not be identical since one case may have multiple samples that require testing.

Intelligence Unit

The Intelligence Unit at the SLC PD has provided indispensable help to law enforcement personnel. Specifically, this unit helps to build strong cases against meth abusers as well as investigates calls for complaints by community members. In 1999 the SLC PD, with the aid of the Intelligence Office, received and investigated more than 660 calls for complaints. In 1998, before the Intelligence Office existed, the department handled only 402 calls for complaints.

The Intelligence Unit also recently helped to close an investigation involving distribution, importation, and manufacturing of illicit drugs including marijuana, cocaine, and methamphetamine. The investigation revealed that at least three to five pounds of methamphetamine was being distributed to multiple towns on a monthly basis.

The termination of the investigation resulted in more than 41 people being arrested (including 4 suspects in a homicide case); approximately \$70,000 in cash seized; 35 pounds of marijuana and two pounds of methamphetamine confiscated; and 22 cars impounded.

With information gathered from several different agencies, the Intelligence Analyst utilized the computer program “Analyst’s Notebook” to create a link chart, or a picture of all involved parties and their relation to one another. According to the Intelligence Analyst, it was the cooperation among multiple agencies that resulted in the successful completion of the investigation. Those involved in the case include the FBI (primary investigating agency), DEA, Salt Lake City Police Department, and the Salt Lake County Sheriff’s Office.

Inter-agency collaboration is not unique to this case. In fact, law enforcement personnel have contributed to the intervention effort by sharing intelligence information among law enforcement entities including the Salt Lake City Police Department, West Valley City Police Department, and the DEA. As a result, all cooperating agencies have a more comprehensive view of the meth problem in Salt Lake City and the surrounding communities.

Enhanced Prosecution and Nuisance Abatement

The goals that were set forth for the city and county prosecutor offices are to enhance the prosecution of civil and criminal cases related to methamphetamine through increased staffing

and partnerships; and to use civil remedies to reduce the impact of methamphetamine on neighborhoods (including filing nuisance cases with the city prosecutor's office).

Since the program began, a district attorney, a city prosecutor, and a paralegal have all been co-located at the SLC PD for 20 hours per week each. Initially, there was substantial support for hiring a full-time DA instead of splitting time between a DA and a city prosecutor. Most methamphetamine-related cases are felonies which do not fall under the jurisdiction of the city prosecutor's office. Therefore, many partners in the Initiative felt that by hiring a full-time District Attorney more cases would be taken to court.

The decision to co-locate attorneys from both offices has had some positive outcomes, however. First, the city prosecutor has been available to screen cases thereby allowing cases to be processed much more efficiently. Also, she has made herself available to answer questions from law enforcement personnel, which has been especially helpful for questions regarding evidence-collection and the effective way to build a case that will be prosecutable.

Nuisance Abatement Letters and Cases

Nuisance abatement has been a focus of the Methamphetamine Initiative from the beginning. By utilizing the civil court system, laws could be enforced that would help to rid the city of nuisance properties including residences that house illegal criminal activity such as drug trafficking and clandestine laboratories. Since the start of the Meth Initiative project in Salt Lake City, 32 letters have been sent to owners of nuisance properties, but the city prosecutor has not filed any cases. According to one source, about 80 percent of nuisance cases are resolved after the first letter is sent. Some argue that it is the remaining 20 percent of the cases that present the most serious problem to the community and therefore more cases should be filed by the city prosecutor.

Prosecution of Drug Cases

Both city and county prosecutor's offices handle a large number of drug cases per year. The following is information provided by the District Attorney's office for Salt Lake County concerning all the drug cases they handled in 1998 (Exhibits 7 and 8).

More in-depth data on drug cases will be gathered. Specifically, data will be collected on all drug cases and methamphetamine cases according to most serious charge (i.e., sales, possession, manufacturing). Additionally, disposition information will be provided for all drug cases as well as methamphetamine-related cases. Dispositions will be recorded as “plea bargained,” “dismissed,” “not guilty,” “guilty,” or “other.” This information is expected to be compiled by March 2000.

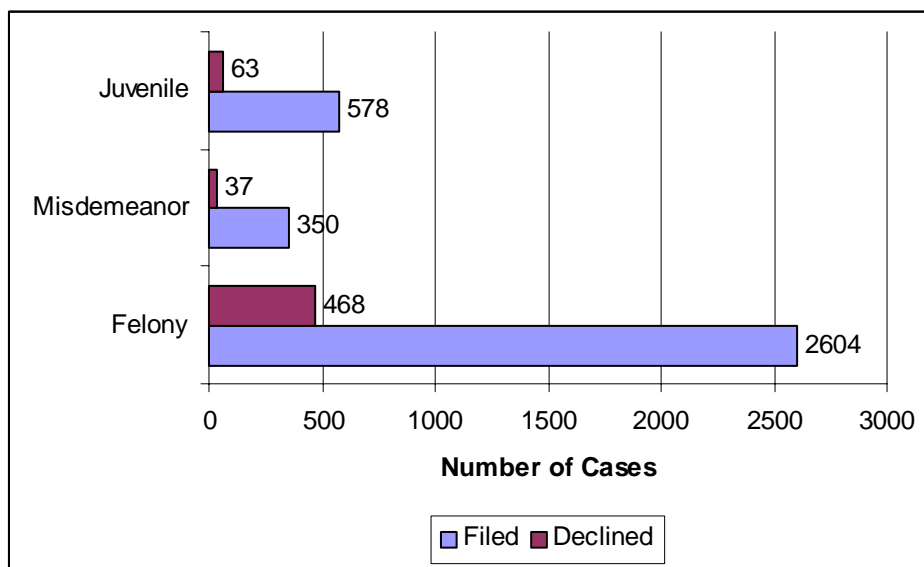
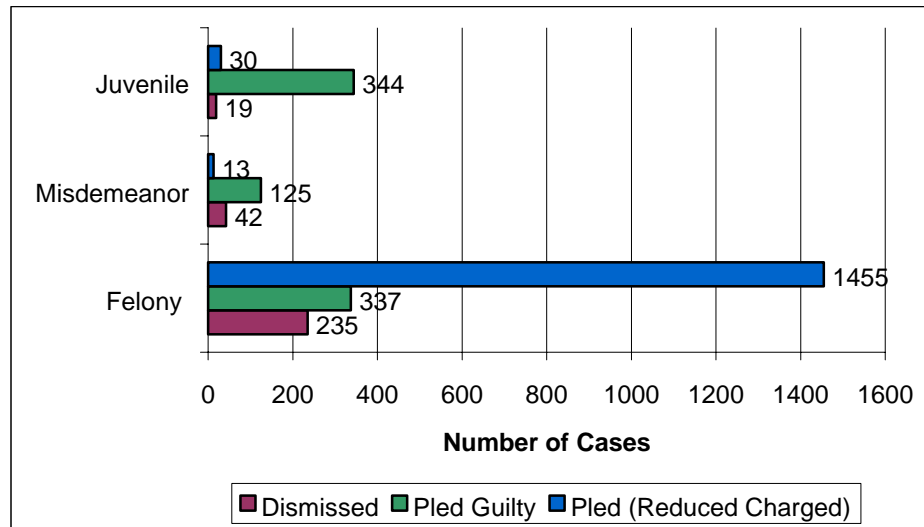
Exhibit 7: Salt Lake County District Attorney Drug Case Data (1998)

Exhibit 8: Salt Lake County District Attorney Drug Case Dispositions (1998)



Child Endangerment and Adult Protective Services

Intervention efforts have also been directed specifically at children, elderly, and handicapped individuals. In fact, strategies to address child endangerment and adult protective services issues in relation to methamphetamine production, distribution, and abuse were outlined at the start of the project.

Child Endangerment Legislation

One of the ways the Meth Initiative is helping to protect children is by composing new legislation outlining sanctions for offenders who endanger children by allowing them to be in the presence of illegal drugs. At present, the current laws for child endangerment are proscribed as misdemeanor offenses. Several members of the Meth Initiative are working to change those criminal offenses to felonies whereby indeterminate sentences would be available. If passed, a person will be charged with a *third degree felony* if a child is exposed to, ingests, inhales, or is in contact with illegal drugs or chemicals and will be charged with a *first degree felony* if a child is actually harmed.

Youth and Family Specialists

In addition to this legislation, the Meth Initiative has also provided for a Youth and Family Specialist (YFS) at the SLC PD. Youth and Family Specialists address the concerns of children, elderly, and disabled individuals during law enforcement operations. Among other things, the YFS provide front-end assessments of children, perform crisis intervention at crime scenes, and link individuals to other social services. Once the removal of a child is authorized however, the Division of Child and Family Services intervenes in place of the YFS.

DCFS and Health Department

Additional assistance for child endangerment and adult protective services is provided through two members of the Meth Team (a DCFS worker and a Health Department worker). Both are funded through the Bureau of Justice Assistance (BJA). Below is a table outlining the demographic characteristics of the individuals that the DCFS worker encountered during the last two quarters of 1999 (Exhibit 9). These data include only those cases handled through the Methamphetamine Initiative. While the DCFS worker handles cases involving any drug, most of the cases referred to below involve methamphetamine.

Exhibit 9: Utah Division of Child and Family Services Client Demographics (1999)

Division of Child and Family Services								
		July	August	September	October	November	December	Total
Gender	Male	3	7	8	3	14	6	41
	Female	1	5	2	5	6	3	22
Race/ Ethnicity	White	1	4	9	5	17	6	42
	Black	0	2	0	0	0	0	2
	Asian/PI	0	0	0	0	2	0	2
	Hispanic	2	0	1	3	1	2	9
	Native Amer.	0	3	0	0	0	0	3
	Other	1	3	0	0	0	1	5
Age	> 18	4	0	10	8	20	9	51
	18-30	0	12	0	0	0	0	12
	31-50	0	0	0	0	0	0	0
	51-64	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0
Total Admissions		4	12	10	8	20	9	63

Data were also collected on the number of children served, removed, and returned to parental custody by the DCFS worker (Exhibit 10). Again, this information is representative of only those cases handled through the Salt Lake City Methamphetamine Initiative.

Exhibit 10: DCFS Case Outcomes (1999)

	July	Aug	Sept	Oct	Nov	Dec	Total
# Children Served	4	12	10	8	20	9	63
# Children Removed	0	3	10	0	13	7	33
# Returned to Parents	0	0	0	0	0	0	0
# Times DCFS Called to Law Enforcement Scene	0	5	7	3	8	4	27

For the Health Department, data were available on the number of cases the worker has handled through the Methamphetamine Initiative. Specifically, listed below is the number of locations closed to occupancy, closed to entry, and reopened (Exhibit 11).

Exhibit 11: Health Department Quarterly Statistics (1999)

	July	Aug	Sept	Oct	Nov	Dec	Total
# Locations Closed to Occupancy	9	6	4	3	3	9	34
# Locations Closed to Entry	1	0	4	3	3	8	19
# Locations Reopened	0	5	2	2	6	3	18
# Times Health Department Called to Law Enforcement Scene	10	10	4	3	4	13	44

Treatment

The Salt Lake City Meth Initiative initially focused on the Dependency (Family) Drug Court as the main treatment component of the project. Initially, it was the hope of those involved in the program that the Meth Initiative could provide some monies to the court. Unfortunately, through unforeseen contractual technicalities, the funds were contracted through the Division of Child and Family Services, however the court has experienced difficulties accessing the funds. Nevertheless, the Court has remained up and running for more than nine

months and has enjoyed some success. Case studies have been conducted on three graduates of the Dependency (Family) Drug Court program who all believed that the drug court was a worthwhile and life-changing experience. The results of the case studies may be found in Appendix A.

In addition to these qualitative data, statistical information was gathered from both the Dependency (Family) Drug Court and the Adult Drug Court. Exhibit 12 shows drug court data on the total number of people who have been accepted into the program, the number of people who were charged with a methamphetamine-related crime, and the total number of people who have successfully completed the program.

Exhibit 12: Drug Court Cases

	Dependency Drug Court[#]		Adult Drug Court	
	1998	1999	1998	1999
Number of Drug Cases	-	24	104	105
Number of Meth Cases	-	12	52*	52*
Number of Graduates	-	5	82 ⁺	50

According to the Dependency Drug Court, a case may include more than one person, but graduates are counted as individuals.

*The Adult Drug Court estimates that at least 50 percent of all cases entering the program document methamphetamine as their primary drug of abuse.

+This figure may be slightly inflated due to inconsistent record keeping from 1998 to 1999.

Although a treatment component is not currently a formal part of the Meth Initiative, there are representatives from the local treatment community who voluntarily participate in the project. These include individuals from the Salt Lake County Division of Substance Abuse, the Utah State Division of Substance Abuse, and the Dependency (Family) Drug Court. These agencies provide representatives to sit in on the Partner's Work Group meetings, to attend the subcommittee meetings, or to just provide expert advice when necessary. It is the hope of the treatment community that future grants will include a treatment component so that their resources may be disseminated to a larger portion of the population. Fortunately, other non-treatment agencies recognize this oversight and support the need for a treatment component in a grant that deals with drug issues.

Prevention

The prevention component of the Methamphetamine Initiative is divided into two parts: a public awareness campaign and a training team that would develop a training curriculum to reduce the risk of physical harm and increase the public's knowledge of methamphetamine.

Public Awareness Campaign

The Public Awareness and Training subcommittee of the Meth Initiative recently (February 2, 2000) held a kickoff for the campaign against methamphetamine. This campaign includes PSAs, billboards, TV ads, and radio announcements. Exhibit 13 indicates the scope of public awareness resources that have been employed in 1998 and 1999.

Exhibit 13: Public Awareness Efforts

	1998	1999
Brochures	1691	0
Public Service Announcements	0	0
Ads (radio, TV, billboard)	0	30 Billboards
Community talks/meetings	61	9
School presentations	2	1

Training

Both the DCFS worker and the Health Department worker have conducted training sessions for the Meth Initiative. The number of training sessions that are conducted by either of these individuals as well as the number of participants at these sessions are noted. Exhibit 14 summarizes this information for the last two quarters of 1999 (July through December).

Exhibit 14: DCFS and Health Department Trainings (1999)

	July	Aug	Sept	Oct	Nov	Dec	Total
# Training Sessions	1	2	5	6	4	3	21
# Participants	10	56	377	89	52	59	643
Level of Satisfaction	4.5	4.26	4.67	4.42	4.7	4.43	4.49*

*Participants of the training sessions were asked to rate their level of satisfaction with the content of the training with “1=Poor,” “2=Fair,” “3=Good,” “4=Very Good,” “5=Excellent.” This number indicates the average response over the six month period of time.

Community Policing

The Salt Lake City Methamphetamine Initiative is attempting to alleviate the local drug problem by becoming more proactive and community-oriented. The Meth Initiative outlines their community policing effort according to three elements: 1) work that is being done by the Community Action Teams (CATS), 2) law enforcement response to community complaints, and 3) partnerships with other law enforcement entities.

Community Action Teams

The CATs were originally formed as a result of a Comprehensive Community Project (the focus was on juvenile crime prevention) that began 5 years ago. There are 15-20 agencies involved in CATs with between 8 to 35 or 40 members per CAT. Some agencies assign more than one person to a particular CAT. There is one designated leader per CAT.

Meetings are held at least every two weeks, and often once a week depending upon the CAT’s case load or the participants’ schedules. CATs work on an address-based system where addresses are chosen based on information given to the CATs by a complainant. In general, in order for an address to be considered at a CAT meeting, it must be necessary for more than one agency to be involved.

Cases coming to the CATs that involve methamphetamine are often worked by CAT's, COP officers, narcotic officers and Meth Initiative personnel. Subsequently cases are also received by the CAT's from narcotic officers, COP officers, and Meth Initiative personnel. It is

the hope of the CATs that they will remain involved in the methamphetamine investigations so that they may share valuable information with agencies like the SLC PD.

Nuisance Abatement

Nuisance abatement in Salt Lake City has been an important element of the Methamphetamine Initiative since the project began. In Salt Lake City, the nuisance abatement process begins with a letter to the property owner. If the owner fails to comply with the stipulations of the nuisance letter then the city prosecutor has the authority to file a civil case in court. As stated above, the city prosecutor has not filed any nuisance cases as yet.

CATs have also been an integral part of the nuisance abatement effort of the Meth Initiative. Because they work on an addressed-based system, members often have knowledge of the residences that are receiving complaints. The CATs see the process as a slow one; but they do feel that great strides are being made to improve their communities.

There have been some problems with the nuisance abatement effort, however. First, communication and collaboration between the CATs and other law enforcement units has been lacking. This sometimes leads to two areas conducting investigations on the same properties. If the CATs and other law enforcement units shared more information on cases, valuable resources would be free to concentrate on other cases.

Also, it appears that some law enforcement personnel and community members view the process as too time consuming without producing many significant results. Because of these opposing views, it is difficult to get substantial support to continue fighting nuisance properties.

Consensual Searches

Consensual searches, or “knock and talks,” are an addressed-based investigative tool that the Salt Lake City police department uses to follow up on complaints (usually made by community members) about suspicious activity in housing units. Several officers inform the homeowner or tenant that they have been receiving complaints about that particular residence. They ask the resident for permission to “come in and look around.” Somewhat surprisingly, residents often allow officers into their homes to look around, and in many cases officers encounter illegal activity in the residence.

The SLC PD has utilized “knock and talks” for years, however the Meth Team has kept information only on the number of “knock and talks” that have been conducted since the officers began using this tactic for the Meth Initiative (October 1999). Overall, 112 complaints were assigned to “knock and talk” teams. Of these, 95 complaints have been closed and 17 are still open. Exhibit 15 shows the outcomes of these cases.

Exhibit 15: Knock and Talks*

Case was opened by law enforcement after the search	30
Individuals were cited or arrested	21
Residence was vacated	20
Residence was searched and there were no signs of illegal activity	25
Complaint was assigned to a different agency that was already working on the case	2
Complaint was not verified due to no one home or entry was denied	15

* The numbers do not add to 112 because categories are not necessarily mutually exclusive.

Partnering with Other Law Enforcement Agencies

One of the goals of the Methamphetamine Initiative in Salt Lake City is to develop a unified law enforcement effort to combat the drug problem. Salt Lake City Police Department has recently begun working more closely with West Valley City Police Department as well as the Drug Enforcement Administration. The objective is to work collaboratively on investigations and therefore utilize resources at an optimal level.

Other Issues

A final issue that arose during a recent site visit is the political changes that have been taking place in Salt Lake City. As of the first of the year, a new mayor has been sworn into

office and the chief of police of the SLC PD resigned. There is currently an acting chief overseeing the daily activities of the department. There is a sense from some participants that there may be some employment and programmatic changes in both the mayor's office and the police department that could affect the Initiative.

Appendix A

Graduate 1

As noted above, each participant has general court requirements to fulfill such as urinalysis tests (UAs) and court appearances, but they also engage in individual program stipulations. One woman is currently in a three year program. Her initiation into Family Drug Court began with a drug and alcohol assessment. She was required to submit to three random UAs a week and had to meet at the Family Drug Court twice a month.

She first participated in a residential treatment facility where she received drug treatment and counseling. During this time her son was in foster care. Once she completed the residential program she was placed in a program for mothers and children at which point her son came to live with her.

She believes the Family Drug Court program is absolutely wonderful. She receives information/training on a number of topics including parenting, relapse education (education to prevent a relapse situation), and healthy relationships. She also participates in group therapy and a program called Therapeutic Environment for Children.

Her case worker has helped her start a new life. The DCFS worker is currently processing housing papers so that she and her son can live on their own. She is also getting help from employment services and is working on getting her GED. She looks forward to eventually being trained on computers for future employment.

She feels that this program is the best thing that has ever happened to her. Now she feels that she is (physically and emotionally) “where she needs to be with herself and her son” and no longer takes her time with her son for granted. She is drug free and is reconsidering her marriage to her husband who also has a substance abuse problem. When she graduated from the Family Drug Court she was proud of herself and now feels “empowered” to move her life in a more positive direction.

Graduates 2 and 3

These last two cases are a husband and wife who went through the Family Drug Court together. The wife had a substance abuse problem and had lost her child to DCFS. She was asked if she wanted to participate in the Family Drug Court and was told that it would be possible for her to get her daughter back more quickly than if she were to go through regular court. She agreed.

Although her husband had no substance abuse problem, he was also restricted from seeing his daughter who had since been placed in foster care. He voluntarily entered the program and agreed to fulfill all necessary requirements to graduate. He and his wife were required to give random UAs and appear in court. In addition, they participated in marriage counseling, parenting classes, and individual counseling. For herself, the wife participates in an aftercare program as well as a self-help group specific to the substance she had abused.

Their overall feelings about the drug court were that you have to be serious about participating and commit fully to the program. “The sanctions are very tough” if you do not comply with Family Drug Court rules and standards. “You can’t fool the court with UAs. They make it random so that it is easy to figure out who is not complying.” The motivation for this couple was regaining custody of their child.

They have both completed drug court and have gotten their daughter back. Life after drug court for this couple “feels weird” because they are accustomed to being kept very busy with the Family Drug Court requirements (counseling, treatment, UAs, court visits). Now they spend most of their time enjoying their freedom from the Family Drug Court.

With regard to future plans, the wife is trying to make amends with people who were alienated from her during her drug use. Both her and her husband are trying to “enjoy each day” and are “trying not to take things for granted.”

The Meth Initiative in Dallas

Craig D. Uchida

Carol Putnam

Introduction

The Methamphetamine Initiative is under the direction of the Dallas Police Department (DPD). Funds were requested to enhance operational strategies and to expand those strategies into its community policing model. The department indicated that there is a “lack of understanding on the part of citizens and officers alike about the impact of Methamphetamine use in the city.” To overcome this problem, the DPD cited five strategies for the project:

- Public education, including training for citizens and the development of educational material;
- Treatment program funding to reduce recidivism and determine effective treatment methods;
- Interdiction through identification of precursor chemical suppliers;
- Develop problem solving strategies; and
- Develop enforcement strategies.

With grant funding DPD plans to use overtime monies to develop a more user-friendly intelligence database, educate different community groups and patrol officers about methamphetamine, and supplement enforcement. Equipment will also be purchased to assist detectives in surveillance operations.

The DPD will partner with the Greater Dallas Council on Alcohol and Drug Abuse (GDCADA) in three areas—research, education and treatment. In the area of research, the Dallas County Community Supervision and Corrections Department and GDCADA will collect data from substance abuse assessments to develop a local methamphetamine user profile and to identify effective treatment. In the area of education, GDCADA will conduct a public awareness campaign to alert the public about the dangers of methamphetamine use and hold a one-day

symposium of professionals to share the latest information known about methamphetamine. In the area of treatment, GDCADA will provide treatment vouchers to individuals who seek treatment for methamphetamine specifically. These individuals do not have to be involved with the criminal justice system.

The DPD will also partner with the Dallas County DIVERT Court to provide inpatient treatment for a small number of methamphetamine users who are arrested for drug possession or fraudulent possession of a controlled substance prescription.

Background

The Dallas Police Department (DPD) serves a population of over one million with a sworn force of approximately 2,860 officers. Nearly 120 officers make up the Narcotics Division where the grant is housed. The DPD ranked methamphetamine as the fourth most commonly abused substance in the city, after alcohol, crack, and powder cocaine. To combat methamphetamine use, the DPD focuses on enforcement, intelligence gathering, safety, and education. At the time of the grant application, the department had one team of officers (six detectives and a sergeant) dedicated to enforcement and investigations. Most of the targets for enforcement are mid to upper level organizations responsible for the importation of meth into the Dallas area from Mexico and California.

History of Methamphetamine

Through interviews and published distribution sources, we confirmed that outlaw motorcycle gangs and independent groups historically were the first distributors of methamphetamine in Dallas. In recent years, however, organized trafficking groups from Mexico have become the primary distributors of large amounts of methamphetamine (NNICC, 1997; TCADA, 1999). In interviews, detectives said that the biggest change in the last ten years is that Mexican Nationals are now doing the bulk of meth cooking and distributing in the Dallas area. One detective noted that in the 1980s and 1990s “white speeders” were the only ones who used and manufactured meth. That has changed. By 1994, Mexican Nationals dominated the trade. Users have changed as well – whites, Hispanics and an occasional African-American will be caught with meth. In the 1980s only whites were using the drug.

In addition to changes in distributors and users, detectives noted that the process for cooking has changed. Instead of the “P2P” method that could take up to 24 hours to produce meth, cooks are now using the “cold cook or Nazi method” that takes far less time to manufacture. The quantities are also smaller.

Partnerships

The DPD has two partners in this initiative – the Greater Dallas Council on Alcohol and Drug Abuse (GDCADA) and the Dallas County DIVERT Court. GDCADA is responsible for a treatment outcome study, an epidemiological study, a public awareness campaign, and a Dallas-area methamphetamine symposium. This organization meets with indigent clients, especially those with drug and mental health problems. They have a four-step process that includes screening, assessing, referring, and placement.

DIVERT Court is one of four in the state of Texas and serves as a pre-diversion court. People are brought to this court if they have been arrested for possession of a controlled substance that weighs less than one gram. For the most part, these are first-time offenders, who may have an arrest for a misdemeanor or a traffic charge.

Funding for this court comes from the state and also through the federal government. A number of agencies work with the court, including adult probation, the Greater Dallas Council on Alcohol and Drug Abuse, and the Texas Association of the Drug Court Professionals. To measure the addiction level of persons brought to court they use the addiction severity index. They also use a mental health questionnaire, which is administered by the staff psychologist.

The program manager indicated that treatment costs have increased overall in the last two years and that it has forced the court to reduce the number of people in the program. Originally they had allowed for about 200 clients but now with the budget cuts, they can only take 105 in the program. Of these, seven are meth users and five are amphetamine users.

The drug court meets every Tuesday night. There is a drug court team that includes the judge, an assistant district attorney, a public defender, three case managers, and treatment providers. The court team meets from 5:00 to 6:00 p.m. and the court convenes from 6:00 p.m. to about 9:30 p.m.

Drug Market Dynamics

According to DPD detectives, buying and selling meth is “clique-ish”. That is, most meth dealers only sell to people they know and thus are hesitant to sell to outsiders. The detectives claim that this is part of the “paranoia” of meth users and dealers. Generally, most of the users and dealers are white males and females, age 18 to 35. Detectives have seen older people involved – some are in their 60s. Cookers are primarily male and “run the show.” Females are given the tedious jobs of clean up. One detective noted that meth is a “white trash” drug, with a small group of users and dealers involved in the trade.

Law enforcement officers indicated that Mexican Nationals have become involved in the market place. While they prefer to sell to Hispanics, it is not unlikely that they will sell to a white undercover officer, though they will charge more per pound. One detective noted that a Hispanic could buy a pound for \$6,500, while a white person could be charged \$7,500 to \$8,000 per pound. Mexican Nationals are bringing “finished product” into the United States at a rate of 40-50 pounds per trip. The quality control is poor because of the mass production involved – purity is weak, the drug is “cut” or diluted as it passes from one person to another. One detective estimated that the purity level was about 12-15 percent. The price has also dropped from \$15,000 per pound in the 1980s to its current value of \$7,000 per pound.

Some detectives have noticed that the “small box lab” manufacturers are increasing and that hotels are locations for this activity. However, they believe methamphetamine laboratories are a small problem compared to other sources of methamphetamine distribution. There are too many dealers and suppliers that bring in methamphetamine from Mexico and other places. As a result, laboratories were not part of the enforcement equation in 1998 and early 1999. (This has changed since December 1999 when labs suddenly became the focus for enforcement.)

The views of the detectives are substantiated by anecdotal evidence provided to the Texas Epidemiology Work Group in 1998. The research indicates that most of the methamphetamine in Dallas originates in Mexico, although local labs are becoming more common, especially north of Dallas (TCADA, 1999).

An interview with a methamphetamine user revealed slightly different information. She said that she bought meth when she was 11 years old from friends and later from her friends’ parents. Eventually, she began to work her way through the maze of buyers and sellers and

made contact with Mexican distributors. Her ex-boyfriend was also heavily involved in trafficking, mostly selling pounds of meth. She substantiated the officer's views about the cost of meth depending upon race -- \$800-\$1,200 per ounce for white people; \$400-\$500 per ounce for Hispanics. Cash was not the only commodity used. Some dealers took checks or tangible goods like televisions and VCRs. Dealers would sell meth at different locations – at grocery stores, parking lots or residences.¹

According to this user/dealer, the best methamphetamine originates in the Philippines, coming to Dallas via California. It is normally purple in color and resembles glass. She also indicated that approximately once a month someone drives to California and brings methamphetamine back. She said that it is worth the drive to California and back, given the profit that can be made on this particular type of methamphetamine (the seller stated that it was possible to get \$15,000 per pound for the Philippine methamphetamine). The seller indicated that the primary distributors for this type of methamphetamine were Vietnamese, Laotian, and Hmong. She also said that this indicated a changing pattern of user – that Mexicans and Asians were becoming more involved in the last three years.

A second dealer/user discussed his involvement in the drug trade. He learned how to make meth from motorcycle gang members in the 1980s and sells it in small quantities to 6 to 12 people per week. He can get about \$600 to \$800 per ounce in Dallas. Most of his customers are older white males.

ADAM Data

For approximately two weeks every calendar quarter, the Arrestee Drug Abuse Monitoring Program (ADAM) interviews arrestees that have been booked in the past 48 hours about their drug use history. Arrestees are asked to submit to a urine drug screen.

From ADAM data for the 1990s we find that a small percentage of arrestees have tested positive for methamphetamine use. Exhibit 1 shows that meth use by arrestees fluctuates but remains at a fairly low level since 1990. When compared to other ADAM sites in the West and Northwest methamphetamine use is low. This finding is a bit surprising, especially given Dallas's proximity to the Mexican border.

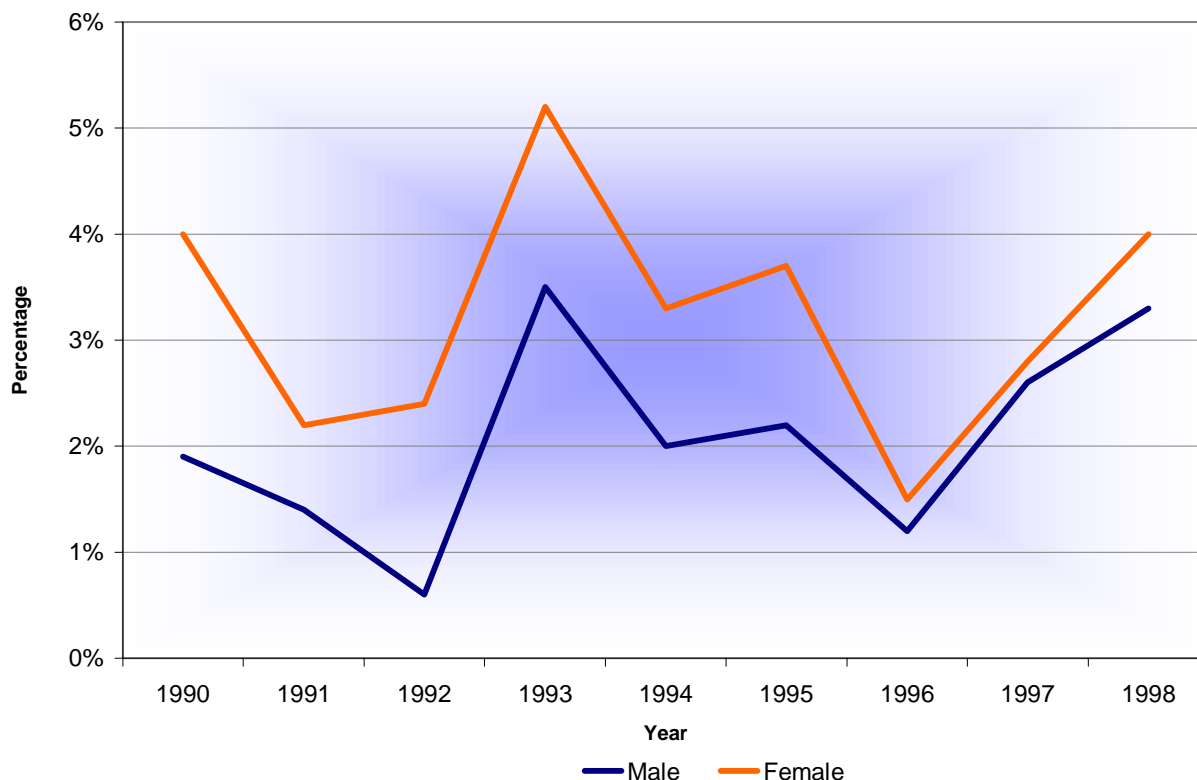
¹ The evaluators observed detectives purchase meth from this user in a parking lot of a shopping center. Eventually

Other methamphetamine indicators in 1998, while not conclusive, have shown an upward trend. For example, in the first half of 1998, the rate of Dallas emergency room mentions of methamphetamine is nearly 5 for every 100,000 emergency admissions, which is only slightly below the first half of 1995, the largest rate seen in the 1990s (TCADA, 1999).

Exhibit 1: Percentage of Male and Female Arrestees Testing Positive for Methamphetamine, Dallas 1990-98 (NIJ, 1999)

	1990	1991	1992	1993	1994	1995	1996	1997	1998
Male	1.9	1.4	0.6	3.5	2.0	2.2	1.2	2.6	3.3
Female	4.0	2.2	2.4	5.2	3.3	3.7	1.5	2.8	4.0

Percentage of Male and Female Arrestees Testing Positive for Methamphetamine, 1990-98 (NIJ, 1999)



she became an informant for the detectives and allowed us to interview her.

Intervention

In the first year of the meth initiative, DPD narcotics detectives targeted the mid to upper level supplier. Generally, detectives relied upon confidential informants to get them close to dealers. In the second year attention has shifted to the seizure and dismantling of clandestine laboratories. Detectives are now involved in obtaining and implementing search warrants and overseeing clean-up through funds provided by the Drug Enforcement Administration.

Data from DPD indicate that 15 labs were discovered and dismantled from July 13, 1999 to January 1, 2000. The cost to the department for three of the labs was nearly \$7,500. DEA paid for nine clean-ups, the county paid for one, and costs for two others are “pending.” Most of these were “Nazi labs”.

In terms of intelligence information and data, DPD contracted for a software package that will convert data from an existing database to a new system. Currently, all incidents involving drugs are entered into an outmoded system. These include characteristics of the incident, the drug offender, amount of drug seized, its value, and other information. Unfortunately, the system is cumbersome and not readily used by narcotics detectives, though data are entered daily. Because it is a non-Windows based operation, detectives are unwilling to use it. The new system arrived in December 1999 and data conversion to the new system occurred in January 2000. The data are currently being entered and narcotics officers are being trained to use the new system. It will be at least three months until before the information can be analyzed.

The Dallas County District Court provided the number of cases filed for drug manufacturing and possession by month for 1998 and 1999. Cases filed for methamphetamine/amphetamine manufacturing or possession only, and the drug manufacturing and possession charges could not be counted separately. The total number of drug cases filed is down 12 percent between 1998 and 1999. In 1998, there were 8,015 drug cases filed in Dallas County; in 1999, there were 7,156 drug cases filed.

Treatment

To date, three GDCADA clients have completed treatment successfully and eight are currently still in treatment. The DIVERT court has expended its inpatient treatment funds, which

should have provided treatment for four methamphetamine clients. Interviews with GDCADA clients and DIVERT court clients will occur during the March/April 2000 site visit.

Prevention

The GDCADA prevention effort is to be two-fold. First, funding is to be used to disseminate methamphetamine abuse information materials to a 19-county area surrounding Dallas. Second, GDCADA is to launch a public education/prevention campaign based on the information provided by the user's profile that identifies high-risk individuals. To date, information has been distributed in the 19-county area, plus GDCADA has identified approximately six good videos about methamphetamine abuse. However, 75 percent of the funds have still not been expended. GDCADA has determined that public service announcements are too expensive and they are trying to determine how best to utilize the funding.

Community Policing

In Dallas, community policing is a department-wide and Division-level program. In 1996, the department began the Interactive Community Policing unit in two sections of the city and then expanded it city-wide in 1997. In April 1999, 48 officers were assigned to 24 areas in the city to "perform community policing activities." Since that time, it appears that the community policing initiative has grown. Based on information from the DPD website, about 75 officers are now assigned to ICP, with 12-15 officers assigned to each of six Division commands. Subsequent site visits will determine what has occurred with community policing and the Meth Initiative.

Prior to receiving the grant, patrol and ICP officers had not been active in any strategy developed to impact the methamphetamine problem in Dallas County. The department said that these officers had not received adequate training about methamphetamine and limited experience in applying problem solving methods to methamphetamine-specific problems. With the grant, patrol and ICP officers would be trained in the detection of methamphetamine producers and the intelligence information gathered would be summarized in such a fashion that officers could then work on problem solving efforts for methamphetamine.

In 1999, the Narcotics Division trained patrol and ICP officers approximately 25 times on methamphetamine identification and production detection. This training has taken place both in-

service and at the academy. Additionally, training has taken place with the Organized Crime Unit, the District Attorney's Office, the DIVERT court, the Dallas Fire Department firefighters and arson investigators. This education effort has led to increased detection of methamphetamine laboratories.

The Narcotics Division also presented methamphetamine education and detection information to 13 community groups, including apartment managers, boy scouts and crime watch groups, in 1999.

Other Issues

In the summer of 1999, Chief Bennie Click retired and was replaced in September by Terrell Bolton a career DPD officer. Within a month's time, Bolton reorganized the command structure by reducing the number of top management positions from 23 chief-level positions to 17. He also began a process of strengthening his office, by moving two high-profile units - criminal intelligence and public integrity - from the office of investigations to his immediate control. Internal Affairs was also moved to his office.

By the end of October, twelve officers were promoted, while nine top assistants were demoted and transferred. The new additions to the command staff include four women, three blacks, two Hispanics and the department's first Asian-American chief-level officer. Four sergeants were triple-promoted to Deputy Chief positions. Within a week of the changes, seven of the nine assistants filed appeals of their demotions.

Among those transferred were an assistant chief, deputy chief, and lieutenant involved in the Methamphetamine Initiative. The sergeant who oversees the grant directly is still involved as are some of his detectives, though some transfers have taken place.

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The Meth Initiative in Oklahoma City

Craig D. Uchida

Carol A. Putnam

Introduction

The Oklahoma City Police Department (OCPD) is the recipient of grant funds for the Methamphetamine Initiative. OCPD plans to use overtime funds to seize, process, and dismantle clandestine laboratories, and devote more time to citizen training. The grant will cover the costs of training, allow the department to purchase supplies and equipment needed for two years of methamphetamine laboratory processing, and cover additional hours for personnel.

The OCPD will develop a comprehensive methamphetamine public education campaign that will encompass both written and television media. Two videos will be produced for police officers and citizens. The goals are to educate them about the meth problem and to provide officers with information about identifying a meth lab when they first respond to a call for service or make a proactive traffic stop. The OCPD will partner with the Oklahoma County Drug Court program to provide inpatient and outpatient treatment for participants who are addicted to methamphetamine.

History of Methamphetamine

The Oklahoma City Police Department (OCPD) serves a population of over one million—nearly a third of the entire state’s population—and an area of 625 square miles. The police department currently consists of 966 sworn officers (with an authorized strength of 1,030). The Meth Initiative grant is directed by a Captain who is in charge of the Special Projects Unit. The Narcotics Division is a part of this command structure. Three supervisors and 18 officers work in Narcotics.

The history of methamphetamine in Oklahoma City dates back to the mid-1970's, when it was used to “cut” or dilute cocaine, the prominent drug of choice among dealers. According to a chemist who works for the state of Oklahoma, methamphetamine would “gel” when it was heated and would emerge from the cocaine mixture in that fashion. For the most part, the methamphetamine problem in Oklahoma City during this time was exclusively pharmaceutical tablets, such as Dexedrine, barbiturates, and diet drugs. Primarily, meth was distributed by bikers and was produced using the P2P method.

In the 1970s, about 95 percent of meth was produced in the rural areas. Labs were sporadically discovered – about six to ten labs were seized a year. During this time, the same number of PCP labs was seized as methamphetamine labs, and MDA and MDMA were also seen routinely. Additionally, LSD and marijuana possession cases dominated the work of Oklahoma state chemists – they began to see purity levels increase and more potent effects of both drugs.

By the 1980s, marijuana became the drug of choice, with LSD use fluctuating greatly (it almost disappeared and then returned dramatically). Motorcycle gangs controlled about 75-85 percent of the meth market during this period. Generally, they used the P2P method to concoct their meth. The health risks associated with clan lab chemicals was not well known then, even by chemists.

As with other major cities, crack cocaine became the drug of choice in the early 1990s. Meth was a minor problem in the early part of the decade but by 1996, an upsurge in meth use and distribution occurred. Narcotics detectives we interviewed recall finding more and more labs. They also noted a change in the market – there seemed to be more involvement by non-blue collar workers. The professional, white collar criminal became involved and detectives saw fewer dealers and labs from trailer houses. Most of the labs found in Oklahoma City utilize either the ephedrine reduction method or the red phosphorous method. In the last few years, methamphetamine is “starting to look more like crack” (including larger amounts). Currently, it is thought that about 95 percent of methamphetamine production is conducted in urban areas. “Cookers” do not seem to have any fear of the chemicals they are using, since they now produce meth in residential neighborhoods.

Law enforcement officers are more concerned with the health hazards of meth now than before. Over the last 20 years the issue had not been an important topic. But in the 1990s chemists and those who routinely worked clandestine lab dismantling realized the health risks associated with precursor chemical exposure. More training of patrol officers has been provided and narcotics detectives have routinely attended training by the DEA, where they have received certification as hazardous material specialists.

Dynamics of the Meth Market

The meth market has changed considerably over the last decade, according to narcotics detectives. In the 1980s and early 1990s, one detective (known as the “meth king” by his colleagues) literally knew all of the cooks. But, he says, that doesn’t happen anymore because “there are too many out there now.” Most of these are small labs where cooks will sell 8-balls (one-eighth ounce or 3.4 g) for about \$150. An ounce will cost \$700 to \$1,000 with a purity level of about 90 percent. This compares to meth brought in by Mexican Nationals which has a purity level of about 70 percent. A pound of meth can be purchased for about \$4,500 to \$8,000 depending on its origins.

Detectives also noted that “the last two years [since 1997] have been the worst they have seen” in terms of numbers of labs. They attribute the increase to the availability of ingredients in stores and the menus for making the drug on the Internet. They claim that all of the ingredients can be found at the “Super Center Wal-Mart” or similar stores.

The more sophisticated distributors appear to be “more business-minded” than the box lab individuals. They cited an example of three brothers who cooked and operated a large “business”. Individuals purchased different ingredients to avoid bringing attention to themselves and then brought them to different locations. The detectives said that there were seven different labs for this family. They produced pounds of meth and were charged with conspiracy to manufacture, which has a higher sentence than possession with intent to distribute. To date, two of the brothers have been sentenced in Federal court to over 360 months each.

Narcotics detectives also noted that there has been an increase in female cooks, but the “male hierarchy is still alive.” They also indicated that there is a “subservient structure” to meth distribution. This means that women are used as distributors at dance bars and as prostitutes. The stripper bars are the same places that conducted business in the 1980s with biker gangs. The strippers both sell and use meth as it keeps their weight down and their energy levels up.

Lastly, detectives and chemists indicate that clandestine labs have moved from the rural areas into the city. Warehouses, apartment complexes, and single-family homes have been locations for lab seizures.

While information is limited, it appears that the typical methamphetamine user seen in treatment is 21 to 40 years old, white, women with children. The users are “common everyday people”—regularly employed, or housewives, or students.

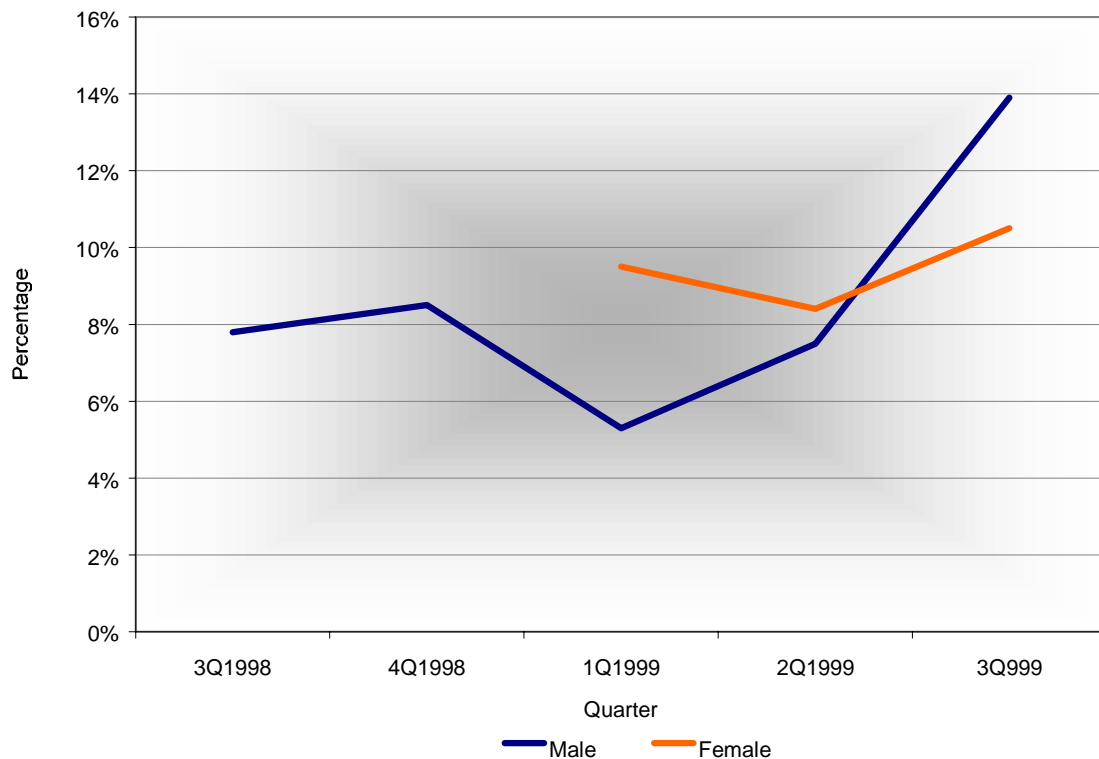
ADAM data

In the fall of 1998, Oklahoma City added an indicator of drug use within the criminal justice population – the Arrestee Drug Abuse Monitoring (ADAM) program. For approximately two weeks every calendar quarter, researchers with the ADAM program interview arrestees that have been booked in the past 48 hours about their drug use history. The arrestees are then asked to submit to a urine drug screen. The results from five quarters of data collection are presented in Exhibit 1.

Due to changes in how arrestees are sampled in the third quarter of 1999, it is not possible to determine whether the difference seen between quarters is significant. However, the percentage of male arrestees testing positive in Oklahoma City is greater than rates found for 21 of the 35 ADAM sites in 1998. Oklahoma City female arrestees cannot be compared to other sites in 1998 because data were not collected.

Exhibit 1: Percentage of Male and Female Arrestees Testing Positive for Methamphetamine in Oklahoma City by Quarter

	3Q1998	4Q1998	1Q1999	2Q1999	3Q1999
Male	7.8	8.5	5.3	7.5	13.6
Female	N/A	N/A	9.5	8.4	10.5



Other Sources of Information

Other anecdotal information sources report that the state of Oklahoma is experiencing an "epidemic-level" meth problem in the east and southeast portions of the state, especially Latimore and LeFlore counties.

Currently, there are no systematic sources of information in Oklahoma City about how methamphetamine is distributed. Treatment providers report that there seems to be a saturation of methamphetamine distribution in southwest Oklahoma City. Additional information about distribution will be gathered from individuals who are in treatment when we conduct interviews in May 2000.

Partnerships

The Oklahoma County Drug Court is the primary partner for the Meth Initiative.

An Oklahoma Supreme Court Justice was a key instigator in forming the Oklahoma County Drug Court. The Drug Court accepts repeat criminal offenders (not necessarily on drug-related charges) who are facing the prospect of serving time (since participants are facing serving time, the charges against them are felonies). The drug court team screens all applicants. Violent and drug manufacturing/trafficking offenders are weeded out (unless the drug offenders are also users and then they can be considered). Participants enter a guilty plea and then the lawyers are no longer involved. There is a signed contract between the participant and the drug court and the participant is technically on probation as long as s/he is in the program.

Turning Point, a rehabilitation center, conducts an initial assessment of the client. A primary counselor is assigned to a case and the counselor will track the individual through treatment. Each case is reviewed by a case management team that determines if there are other areas in the client's life which s/he needs assistance (dentures, reestablishing connections with children, etc.). The case management team remains involved until any specific goals have been accomplished. There is one primary counselor and four others that can be used, plus three state-certified case managers.

Urinalyses are unannounced and random. The drug court tolerates relapses; relapses are dealt with through immediate sanctions such as community service or a weekend in jail. They have also started a re-entry program for those who end up in prison and recently widened the acceptance criteria to include probation violators. Drug Court currently operates one day a week (on Friday) with two sessions at 10:30 a.m. and 11:30 a.m. There are two sessions because Drug Court encourages employment. The drug staff

meets in the morning on Friday to conduct pre-staffing. The Drug Court started with 15 participants. They wanted to ensure that the first clients received enough support to succeed. Currently, Drug Court has approximately 150 participants. The average time in the program is one year, but participants can spend up to two years. The staff has noticed an increase of relapses during the last phase of the program, so they have increased urinalyses during this period. Meth-related cases are minimal. About 29 of the 150 participants are meth users. We will conduct interviews with as many participants as possible.

Thirteen other law enforcement agencies were part of the partnership that would share in the development of an intelligence system. Unfortunately, this component will probably not be implemented. Concerns about protecting intelligence information according to Federal regulations need to be resolved if the database is to be created.

Intervention

Approximately 30 Special Project and Technical Investigation officers and supervisors from the Oklahoma City Police Department are involved either part- or full-time in the Methamphetamine Initiative. These officers are involved in additional methamphetamine laboratory seizures, appropriate processing, and filing of cases.

One officer from Special Projects is devoted to the Oklahoma County Drug Court program and a lieutenant and three officers are detailed to DEA for the Methamphetamine Task Force. Other agencies, while involved initially with the Task Force have had to pull out due to manpower shortages in their agencies. The only employee funded by the Methamphetamine Initiative grant is a chemist position for two years, to assist with the processing of clandestine laboratory seizures.

The Bomb Squad and the Oklahoma City Fire Department HazMat team also participate in lab seizures, having received training and equipment through the Meth Initiative. In most instances they accompany narcotics detectives to lab seizures. The concern is for officer safety – narcotics detectives are aware that some labs have been booby-trapped by the distributors or cooks. Two small robots were purchased through the grant. These are equipped with small video cameras and can carry sensors to detect

hazardous material. They can climb stairs, roll through a field of grass, stop, turn, look around, and provide officers with useful information.

During the past two years, the officers working on the Meth Initiative have been involved with over 200 lab seizures. Exhibit 2 shows the number of labs seized by the OCPD and the Oklahoma State Bureau of Investigation. For the OCPD, in 1999, 16 of the 112 labs were “box labs” that required 2-3 officers to assist in the dismantling and disposal of chemical waste. One of the seizures was from a vehicle requiring only one officer to assist in dismantling the lab. The other 95 seizures were larger labs that required the services of 3-6 officers, the bomb squad and a civilian chemist. In the first six months of 2000, 78 labs were seized. Twelve of the seizures were box labs, 66 were meth labs. According to official records, three of the meth labs resulted in a fire or explosion.

Exhibit 2: Meth Lab Seizures by Year and Agency

Agency	1998	1999	2000 (June)
Oklahoma City PD	66	112	78
Oklahoma State Bureau of Investigation	269	331	N/A

Observing a Lab Seizure

During the course of a site visit, Ms. Putnam was able to observe a seizure of a lab by OCPD officers. This provided information about how narcotics officers respond and deal with a small lab. What follows is a brief description of how the lab was seized:

Shortly after 10 p.m., the on-call lieutenant received a call about a potential methamphetamine lab in the trunk of an automobile. An OCPD patrol officer made a traffic stop after witnessing erratic driving. When he spoke to the driver, it was apparent that she was intoxicated. The officer then searched the car and discovered a number of jars with various liquids in the trunk. Having been trained on what methamphetamine production looks like, the officer called the narcotics unit for assistance. He then placed the suspect in the back of the police car, filled out an incident report, and stayed on scene until the narcotics officers left. The patrol officer said that the suspect had been kicked out of her boyfriend’s house and was trying to locate a place to stay when she got pulled over. She had two garbage bags full of clothes in the truck along with the jars of liquid.

After her statement was recorded, the suspect promptly went to sleep in the back of the police car and slept through the entire processing.

Two narcotics officers and the lieutenant responded to the call. When the lieutenant arrived and saw the extent of the lab (very small, no security devices, no noticeable leaks or spills, would not have to be processed within an enclosed space), he downgraded the call. This meant that the fire department and/or the bomb squad would not need to respond. A gas toximeter was placed within range of the evidence, to ensure that the gas levels remained safe. The jars were removed from the trunk of the car and placed on the ground in the Public Storage parking lot. (The location was not suspected of being a storage area; it just happened to be where the driver pulled over). The lieutenant and one officer donned protective clothing, while the other officer took the evidence notes and digital camera pictures. They systematically went through opening the jars, taking samples, and testing the liquids with field kits to make some initial determination of what the jars contained. They seized empty jars, needles, and numerous coffee filters as well. One jar, where the substances were beginning to separate into various layers, they tested for both amphetamine and methamphetamine. The amphetamine test was negative, but the methamphetamine test was clearly positive. All the samples will be tested later at the laboratory for more conclusive results than the field tests. While the jars were being processed, a forensic technician arrived and fingerprinted the jars as the narcotics unit completed its testing. The processing at the scene was completed shortly after 1 a.m. The representative samples were sealed in a plastic bucket similar to those seen containing pool chemicals and returned to the narcotics office. The sealed container is placed in a locked storage closet at the narcotics unit and then would be dropped off at the laboratory in the morning when it opened.

The entire process, from receipt of the call to sealing the evidence container, took a little less than four hours. Evidence processing at the scene took approximately two hours, even for such a small laboratory.

Training

As part of the Meth Initiative, all Oklahoma City Police Department officers have been educated and trained in meth lab chemical identification. As indicated above, officers can identify meth materials and know the procedures for handling the problem.

Citizens also receive education and training. Narcotics Division lieutenants have addressed a number of civic groups, citizens, and organizations during 1999. Speaking engagements vary from one-day seminars at Oklahoma State University to morning talk shows on local television. Of direct importance to the Meth Initiative were speaking engagements to the Greater Oklahoma City Hotel and Motel Association and the Oklahoma Natural Gas Employee seminar. Both groups were targeted because meth labs have been found in motels and hotels and gas company employees may notice suspicious chemical odors during their work hours. The Hotel and Motel Association sent about 60 members to the two hour presentation. Line maintenance, service technicians, and meter-reading personnel were part of the audience at the Natural Gas Company presentation. Gas company employees respond to over 600,000 service calls annually and service technicians perform all types of inspections both inside and outside residences and businesses. The presentations consisted of a lecture, videos about meth and a question-and-answer period. They discuss health hazards, common equipment and chemical identification, and procedures to follow if a lab or waste site is discovered. The video shows common glassware, chemicals, and hardware necessary to manufacture meth.

Another audience is being targeted by the Methamphetamine Task Force. These officers hope to reach Walmart, Sam's, and other large warehouse-type stores that sell legitimate precursor chemicals.

Treatment

Currently, no detailed treatment information is available from the Oklahoma County Drug Court program, the partner for the Meth Initiative. As mentioned above, there have been 29 Drug Court clients that have been involved with meth. Interviews with the Oklahoma County Drug Court clients will occur during the July 2000 site visit.

Interviews will also take place with meth users at Turning Point, the rehabilitation center that works with the Drug Court. Turning Point has approximately 30 staff and is part of a larger organization called the Community Action Agency. The Community Action Agency, which has been in existence for approximately 30 years, has about 500 staff members and encompasses such programs such as Head Start. Turning Point takes referrals from the Bureau of Corrections, Probation, Drug Court and the Department of Human Services (DHS). Currently, Turning Point South has 117 active clients, of which the director estimates that 38 percent are meth-involved. All the clients Turning Point sees at its south location are outpatient, but there is a recovery complex for clients who have been in the program 30 to 60 days. The recovery complex, also known as the sober living complex, is funded through a five-year demonstration grant from HUD and has been open two years in September. There are 48 apartments that currently house 52 adults and 65 children (so families are welcome), of which 30 percent are meth-involved. Besides the sober living complex, some additional Turning Point activities are five drug eradication counselors located in different housing complexes around the city and street outreach workers, who provide HIV/risk reduction and prevention outreach. Turning Point has been in existence for about 20 years.

Treatment at Turning Point consists of a minimum of 24 sessions, which usually takes a minimum of six months and the usual treatment time is one year. At first, treatment consists of education about addiction as a disease and then moves to a more individualized program. There is a primary counselor assigned who tracks the individual through treatment, but each case is reviewed by a case management team that determine if there are other areas in the client's life which s/he needs assistance (dentures, reestablishing connections with children, etc.). The case management team remains involved until any specific goals have been accomplished. At Turning Point South, there are nine staff members—a director, four full-time counselors, and four support staff.

The state of Oklahoma requires that both mental health problems and any substance abuse problems must be addressed simultaneously. While addressing both conditions may seem difficult, many clients suffer from substance abuse induced mental health problems (such as depression). A more challenging situation is when the client

has been self-medicating to improve his or her mental outlook; then the client has to be stabilized prior to making a break-through and becoming more mentally healthy.

With regard to interviewing meth-involved Turning Point clients, the director indicated a willingness to set up interviews. He will need to get written consent. We will be able to interview seven to eight clients across two to three days. Also, we will interview two staff members.

Prevention

The Oklahoma police have yet to begin the public awareness and education campaign. Originally a Request for Proposals (RFP) was issued, but only one bidder responded. The RFP was re-issued and a pre-bidders conference was held February 9, 2000. The vendor for the campaign has been identified and should be awarded the contract in July 2000. After that, it will be possible to determine when the public awareness campaign will begin.

Community Policing

At this point, community policing and the meth initiative do not have strong linkages. However, as mentioned above, narcotics officers have begun to meet with a variety of businesses and civic associations to explain the meth problem. Other training and education programs are planned for patrol officers.

Interviews with command staff and ride-alongs with patrol officers will be conducted in the future to determine how well community policing is integrated with the Meth Initiative.

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The Meth Initiative in Little Rock

Thomas C. Castellano

Introduction

In 1998, the Little Rock Police Department, and its partner agencies -- the Pulaski County Sheriff's Department and the Arkansas State Crime Laboratory -- received a \$750,000 grant to participate in the U.S. Department of Justice's Methamphetamine Initiative. Components in the original program design include:

- Educating the public about the hazards of methamphetamine, the chemicals involved, the identity of potential users, their distribution points, and available treatment and prevention programs.
- Community oriented policing and crime prevention personnel being used to establish hotlines to gather information from citizens on the local meth problem and to implement drug awareness programs about meth.
- The training of police officers on what to look for in investigating meth crimes and responding to meth labs in a safe manner. This includes sending local officers to DEA-sponsored classes to certify officers in the dismantling of labs.
- The purchasing of safety equipment to be used during the dismantling of labs.
- The purchase of a gas chromatograph (mass spectrometer) by the Little Rock PD that will be used by the Arkansas State Crime Lab. This will be used to reduce delays in the processing of drug cases, which hit an average turn-around time of 162 days in 1998 (compared to 21 days in 1992).
- The purchase of undercover and surveillance equipment to aid in the investigations of meth crimes.
- The allocation of funds for overtime pay to promote meth investigations by narcotics officers.
- The provision of funds to enhance the delivery of drug treatment services to meth abusers.

- The purchase of computer equipment and crime analysis services to collect and distribute information on the local meth market and individuals in that market. This would result in the establishment of a shared data base system which will give cooperating agencies the ability to share intelligence information.

Evaluation

The evaluation of this initiative includes the collection of data on the nature of the local methamphetamine problem, enforcement and intervention activities on the part of the local partners, and assessments of how initiative activities may have influenced local perceptions and definitions of the local methamphetamine situation. These data come from a variety of archival sources, official crime data, interviews with local officials and participants in the methamphetamine trade, surveys of agency representatives who are either participants in the initiative or who are somehow potentially involved with methamphetamine abusers, and observations of initiative activities during regular site visit.

As part of the local evaluation, three site visits of the Little Rock methamphetamine initiative have taken place. The initial visit to Little Rock took place on April 1 and 2, 1999. Goals included an assessment of some of the basic issues associated with the development and initial implementation phase of the Methamphetamine Initiative, the development of positive relationships with key partners in the initiative, and the identification of data sources that can inform a process and impact evaluation of the program. The visit revealed deficiencies in the automated information systems in place at the Little Rock PD. Specifically, it will be difficult to establish quantitative measures of the local methamphetamine problem and police responses to this problem from this agency's data systems. Fortunately, it appears that other local, regional, and state agencies have the ability to generate decent indicators of these and related phenomena (e.g. Pulaski County Sheriff's Department, Arkansas State Crime Lab, Arkansas Bureau of Drug and Alcohol Prevention, and Prosecuting Attorney's Office of the Sixth Circuit).

The second site visit took place in late June 1999. The primary goal of this site visit was to generate a better understanding of the methamphetamine market in the Little Rock metropolitan area by augmenting local data sources with an original data collection effort. This involved interviewing a random sample of detainees in the Pulaski County Jail. This effort proved quite successful, and resulted in completed interviewees with 52 detainees. Many of the

respondents were intimately involved in the local methamphetamine market and a more detailed portrait of the local meth market was generated than would be possible if only available official data sources were utilized. The major findings from this effort will be detailed below.

The third site visit occurred on December 1-3, 1999 and focused on interviewing new and old partners within the initiative. Relative to earlier evaluative assessments of progress in implementing program components, significant advances were observed. This was largely due to the recent hiring of a Program Coordinator who helped invigorate local efforts. In particular, strong headway was made in initiating a variety of community education efforts. The initiative also witnessed the commencement of in-house training of police officers within the Little Rock and Pulaski County law enforcement agencies, outreach education efforts by the Sheriff's Department, and the beginning of more formal program linkages with the North Little Rock PD, the U.S. Attorney's Office, and the local DEA office. While much progress was noted, deficiencies with regard to proposed information sharing across local agency partners via a shared computerized information system and treatment interventions for meth abusers continued to exist.

Caveat

Initial site visits revealed a striking feature of the Little Rock program that is likely to influence the timing, intensity, and potential effectiveness of the program initiative. That is, Little Rock was selected for funding in the Methamphetamine Initiative despite available baseline data on the local methamphetamine problem which suggested the local problem was relatively minor compared to that found in other jurisdictions. Even most of the local respondents interviewed during initial site visits perceived the local meth problem as being quite secondary to the problems associated with other drugs. Although meth use was commonly recognized as being on the rise within local communities, local governmental and police officials viewed methamphetamine as being a relatively non-threatening problem. For instance, during the initial site visit a representative of the city government stated the "City Manager and the Mayor's Office do not see meth as being a significant local problem."

History of Meth

Little Rock, the state capital of Arkansas, is in the central part of the state and has 183,000 residents within the city limits. There are over 500,000 people in the Greater Little Rock Metropolitan Area. Little Rock is within Pulaski County, having a 1995 population of 352,240.

Within the Little Rock area, as in many areas of the nation, methamphetamine has been a drug available to certain and limited population subgroups since the early 1970s. Commonly associated with biker gangs and the “party scene” at a number of strip and dance bars, meth was not widely found in the local community. Meth was not commonly available, at least partly because local “cookers” were few and far between and limited their sales to small, tightly knit groups. Thus, meth was not considered a significant law enforcement or public health problem. This began to change in the late 1990s, and especially in the more rural area of Missouri. More and more clandestine labs were being discovered in the state. Statewide, there has been a dramatic increase in the number of lab seizures since 1995 (24 labs in 1995, 95 labs in 1996, 240 labs in 1997, 433 labs in 1998).

However, even after federal funding was received through the Methamphetamine Initiative to combat local meth production and consumption, the vast majority of respondents in Little Rock -- and available official data -- indicate the problem of methamphetamine is distinct from and secondary to the problems associated with other illicit drugs in the greater Little Rock area.

The above perceptions hold more strongly in the more urban areas of Little Rock than in the outlying areas of Pulaski County. Interviews with the Pulaski County Sheriff’s Department and the North Little Rock PD reveal a differing perception of the methamphetamine problem as it is emerging in the outlying areas of Little Rock. According to these respondents, “meth is going through the roof” and quickly becoming the major drug problem in their jurisdictions.

Partnerships

Unlike some of the other sites in the Methamphetamine Initiative, the number and scope of interagency partnerships in the Little Rock initiative is limited. The original partners included

the Little Rock Police Department, the Pulaski County Sheriff's Department, and the Arkansas State Crime Lab. Since November 1999, and based upon the recommendation of the evaluator, the North Little Rock PD is now a formal partner in the initiative. Although these agencies work quite closely with the U.S. Attorney's Office, the local DEA office, and the local prosecutor's office, these latter agencies are not formal partners in the program. To date, while some outreach efforts have been made with local school districts, media outlets, and community-based health organizations, these efforts have not resulted in formal program linkages or partnerships. In addition, contacts by the local partners with treatment providers, the local Drug Courts, and state-based substance abuse programs have been quite limited.

Meth Market Dynamics

Prevalence Indicators

There are few sources of information on the prevalence of methamphetamine use in the Little Rock area. For instance, Little Rock is not an ADAM site, and while there have been statements that Little Rock will be a site in the future, relevant local respondents (e.g., Sheriff's Department personnel) expressed they have not been contacted about the program and have not yet even begun a planning process to implement the ADAM program locally.

Fortunately, the Arkansas Bureau of Alcohol and Drug Abuse Prevention has collected and compiled some useful data on the issue. Beginning in October 1997 and continuing through February 1998, the Bureau sponsored a data collection effort from arrestees housed in the Pulaski, Washington, and Drew county jails (N = 567). The present data focus on results from Pulaski County (N = 297, 52.4 % of the sample). In the overall sample and each of the three counties, the highest DSM-III-R diagnosis rate was for alcohol (34% for Pulaski County). In Pulaski, the diagnosis of "upper" use was much lower (5.1%) than in Washington County (25%) and slightly lower than in Drew County (7.1%). In contrast, cocaine was much higher in Pulaski (19.2%) than in the other counties. Across counties, "uppers" were more prevalent among whites than for African-Americans.

Urinalyses indicate that amphetamine use was found in 8.8 percent of the entire sample, much lower than cannabinoid (39.4%) or cocaine (22.8%) use. In Pulaski, almost 70 percent of the arrestees tested positive for drug use, with cannabinoids leading the way (43.5%) followed by

cocaine (36.2%). All other types of drugs were found in less than three percent of the arrestees. Amphetamines were most likely to be found among the 24-44 year olds, and all arrestees testing positive for amphetamines were white.

Arrestees were also asked to self-report drug use within the last three days. Six percent reported use of crystal meth. This compares to 28.9 percent reporting marijuana use and 9.9 percent reporting crack cocaine use. Arrestees were asked if they used or needed drugs. Among Pulaski County arrestees, 14.3 percent of those reported “needing” drugs referred to methamphetamine. This compares to 54.8 percent reporting need for crack and 35.7 percent reporting need for alcohol. Fewer than five percent reported being on meth during their crime.

Compared to the overall sample from the three counties, meth use appears less common in Pulaski County. For instance, about four percent of the positive urinalyses in Pulaski were for amphetamines. In Washington County (NE corner of the state), the comparable figure was 18 percent. Slightly over five percent of the arrestees in Pulaski were found to be abusing or be dependent on “uppers.” The comparable figure for the entire sample was 13.1 percent.

A similar methodology was used with juveniles confined in county juvenile detention facilities, including Pulaski County. Urinalyses revealed the most commonly used drug was cannabinoids (41.5%). Only two percent of juveniles tested positive for amphetamines. Self-report measures and DSM-III-R diagnoses also indicated very few youth having problems with drugs other than marijuana (1.9% diagnosed with “uppers”). Of the 22.2 percent of the total sample reporting being under the influence when they committed their crime, 8.5 percent (n = 4) reported being on crystal meth.

Thus, both adult and juvenile arrestee populations indicate that meth use appears to be fairly uncommon in Pulaski County, relative to the use of other illicit drugs and to levels found in some other Arkansas counties.

Three other studies bear on this issue. One was a “blind” study of women aged 15-44 asking for a pregnancy test at one of 18 health department units in the State, with four clinics being in Pulaski County and two being in Little Rock. Across the state only 29 of the 1,460 women generating urinalyses had traces of amphetamine in their system (.02%). In Pulaski County, two percent tested positive for amphetamines. Eighteen percent tested positive for any drug. Gallup also conducted an adult household telephone survey to estimate alcohol and drug

use among Arkansans. It was estimated that only 0.3 percent of the adult population witnessed methamphetamine use or abuse. For Central Arkansas, the estimate was 0.2 percent of the population. Finally, in a study of 3,850 individuals treated for substance abuse in a four county area including Pulaski, 220 had a drug problem primarily involving amphetamines (5.71%). This compares to 51.3 percent with alcohol problems and 25.2 percent with crack/cocaine problems. Among the 220 individuals with an amphetamine problem, only five were African-American.

More recent data from substance abuse treatment providers in the state indicate that methamphetamine addiction has been increasing dramatically. Treatment facilities began seeing methamphetamine addicts on a regular basis in 1997. During Fiscal Year 1997, 1,230 meth users were admitted into substance abuse recovery centers in the state. In 1998, 1,744 meth abusers were admitted into treatment (a 41.7% increase), and by FY 1999 1,925 meth abusers entered treatment (a 56.5% increase from 1997) (Silverman, Feb. 6, 2000, Arkansas Democrat Gazette). Thus, there are some data indicating the problem of methamphetamine has escalated dramatically in Missouri during the last few years. It remains unclear from these data, however, whether increases in demand for methamphetamine treatment has been concentrated in particular parts of the state (e.g., rural areas) or whether the increases are more evenly distributed (e.g., in Little Rock as well).

Views of Local Officials

Across the site visits, open-ended interviews have been conducted with over 30 law enforcement, court, and treatment personnel. One focus of the interviews has been to assess the nature of the local methamphetamine problem and related interventions.

As indicated earlier, the law enforcement community of Little Rock defines the problem of methamphetamine as being distinct from and secondary to the problems associated with other illicit drugs in the greater Little Rock area. The general consensus during initial site visits was that methamphetamine in the City of Little Rock is considered less of a problem than the crack cocaine problem. Crack has been generally associated with the African-American community, while meth is considered a White person's drug of choice. Meth production, distribution, and use patterns are confined to relatively small groups of people not perceived as major threats to the overall level of public safety.

The above perceptions hold more strongly in the more urban areas of Little Rock than in the outlying areas of Pulaski County. Interviews with the Pulaski County Sheriff's Department and the North Little Rock Police Department reveal a differing perception of the meth problem as it is emerging in the outlying areas of Little Rock. According to one high-ranking respondent, "drug inmates who are white say meth is going through the roof." Respondents also commented on particular features of the local meth market. Unlike crack cocaine, which in the City of Little Rock has been historically distributed in open air drug markets by African-Americans affiliated with known gangs such as the Bloods, Crips, Gangster Disciples, and Black Disciples, methamphetamine is reported to be distributed in smaller close knit circles. According to street narcotics officers within the Little Rock Police Department, methamphetamine is usually distributed among groups of users who frequent the same party circles at local dance clubs and bars. According to narcotics officers, the drug is produced in one ounce to two ounce batches and distributed more for its inducement effects than for profit. These officers suggest that the distribution method is more synonymous with rave drugs such as ecstasy and LSD than that of the cocaine trade.

The narcotics officers reported that meth tends not be present in most of Little Rock. It was reported there are no open-air markets for meth and that meth dealing is an indoor activity, often occurring in strip clubs. A common theme was that "young, white girls love meth," and that it has wide appeal to "party kids."

Officers estimated that about 60 percent of the market involves "personal partiers," cooks who make enough for themselves and a few friends. Tight, little networks based on partying, not profit or loyalty, appear common. This is a non-violent crowd, typically unarmed and respectful of the police. Bikers are a small part of this crowd. Within this market, meth is associated with pornography and sex toys. A life-style of self-indulgence is typical among these users, comprised of the young, non-directed, and sexually active.

The second type of meth market involves "entrepreneurs," cooks who make enough meth for broader distribution. They make an ounce or two at a time, and provide it to friends and low-level distributors. These distributors typically buy in 1/8 ounce lots, and sell it for between \$60 and \$100 a gram, turning a nice profit and having enough meth for personal consumption. Once

again, there is little “formal organization” to these networks. Mexican cartels do not appear to be active in the local meth market.

There are two types of entrepreneur, neither being very sophisticated. The first is the “old school” cooker, typically an older, rural, trailer-park, biker-related individual. These folks are held in higher regard by the narc officers than the newly emerging “Wal-Mart Cooks,” people of mixed educational-level and background who are attracted to the “democratization of drug manufacturing.” Overall, these measures of methamphetamine use in Arkansas and Pulaski County indicate that the perceptions of law enforcement officials are largely correct. The problem is secondary to those associated with other drug types, and the problem appears greater in rural areas and among white than African-American populations.

Jail Detainees

Interview data from 52 randomly selected jail detainees in Pulaski County arrested on drug charges indicate the prevalence of meth may be greater than indicated by official data sources. These data indicate that the sample of Little Rock respondents are quite involved in the meth market, especially Whites and females. The data are summarized in Exhibit 1. A significant minority of the 36 Black respondents reported using meth (27.8%), while the overwhelming majority of the 16 White respondents reported likewise (81.3%). Overall, 44 percent of the detainees reported having used meth. Females were more likely to report meth use than males (62.5% vs. 40.9%), but because there are a small number of female respondents (n = 8), these differences should be treated with caution.

Exhibit 1: Measures of Personal Experience with Meth, by Race and Sex

	Race		Sex		
	Black	White	Male	Female	Total
N	(36)	(16)	(44)	(8)	(52)
Used Meth Ever	27.8%	81.3%	40.9%	62.5%	44.2%
Used Meth in Last 12 Months	19.4%	68.8%	34.1%	37.5%	34.6%
Used Meth in Last 30 Days	8.3%	31.2%	13.6%	25.0%	15.4%
Dealt Meth	2.7%	43.8%	18.2%	0.0%	15.4%
Cooked Meth	2.7%	25.0%	11.4%	0.0%	9.6%

Racial and gender differences persist in these sale and production patterns. Only one Black reported dealing or cooking meth, while over 40 percent of the Whites admitted dealing meth and one-quarter admitted cooking meth. While women were more likely to report using meth than males, no women reported selling or cooking meth. There appears to be gender stratification in the meth market: While women are active in use of the drug, they appear to be excluded from manufacturing and distribution functions.

While personal participation in the meth market is concentrated among whites, a substantial percentage of the Black respondents report knowing people actively involved in the local Little Rock meth market. As revealed in Exhibit 2, about half of the Black detainees know people who use or sell meth, and a quarter know individuals who cook meth. Comparable figures are much higher for the White respondents, with over two-thirds of the sixteen Whites knowing someone who cooks. Thus, while there is a degree of racial segregation in the Little Rock meth drug market, the segregation is by no means complete. Qualitative information gleaned from the interviews suggest that racial cross-over in the meth market tends to involve Blacks who work and party with Whites. In such interactions, Blacks are exposed to meth. This

appears especially true among those who work in the construction industry, where meth is used not only for recreational purposes, but to also enhance work productivity.

Exhibit 2: Measures of Personal Contact with Individuals Involved with Meth by Race

	Black	White	Total
	(36)	(16)	(52)
<u>% Yes:</u>			
Know People who Use, Sell or Cook	63.9%	100.0%	75.0%
Know People who Use	55.5%	87.5%	65.4%
Know People who Deal	50.0%	81.2%	59.6%
Know People who Cook	27.8%	68.8%	40.4%

The interview data also yield evidence that meth is widely and easily available in the Little Rock area. Despite concerted law enforcement efforts to disrupt the local meth market, the quality and availability of meth is perhaps greater now than a year ago. The cost remains the same, about \$80 per gram on average according to the jail detainees. The relevant interview findings are contained in Exhibit 3.

While users, dealers, and cooks tend to be White, there appear to be many of them in the Little Rock area. And they use, deal, and cook the drug quite intensively. Except for the apparent exclusion of women from the production and distribution activities surrounding the meth market, there appears to be little hierarchy in the market. Users, dealers, and cooks are often one and the same. The market appears very “democratic,” exhibiting strong levels of horizontal articulation within the market. While the market is highly diffuse and loosely organized, and is not associated with the violence commonly attributed to the crack market, it is also a market not easily impacted by enforcement efforts. In addition, the racial segregation of the market is by no means complete. Blacks who lead more integrated lifestyles have easy access to meth, and a substantial minority have experimented with the drug.

Exhibit 3: Measures of the Characteristics of the Local Meth Market, by Race

	Black	White	Total
<u>Percent Stating:</u>	(36)	(16)	(52)
Meth is commonly used around here	55.6%	100.0%	69.2%
Meth is a more serious problem than crack	16.7%	31.3%	21.1%
Meth is a more serious problem than marijuana	55.6%	87.5%	65.4%
It is difficult or very difficult to get meth	47.3%	0.0%	34.6%
Would take an hour or less to get meth	38.9%	62.5%	46.2%
Would take an hour or less to get crack	88.9%	62.5%	80.8%
Doesn't know a location where to buy meth	33.3%	0.0%	23.5%
Personally knows someone to get meth from	58.3%	87.5%	67.3%
Can find meth in own neighborhood	22.2%	68.8%	36.5%
Thinks meth is primarily a white person's drug	80.6%	75.0%	78.8%
Compared to a year ago, quality of meth now is:			
Better	27.8%	37.5%	30.8%
Don't Know	55.6%	18.8%	44.2%
Compared to a year ago, price of meth is now the:			
Same	19.4%	62.5%	32.7%
Don't Know	50.0%	18.8%	40.4%
Compared to a year ago, meth now is:			
More available	52.8%	68.8%	57.7%
Don't know	38.9%	12.5%	30.8%
More attention paid to meth now than a year ago	80.6%	62.5%	75.0%
Law enforcement has made meth more of a priority compared to last year	69.4%	87.5%	75.0%

Intervention: Law Enforcement Response

Official Police Data

While the above data illustrate a geographical and racial difference between methamphetamine and other illicit drug use, neither the Little Rock Police Department nor the Pulaski County Sheriffs Department have implemented an automated data collection method for tracking methamphetamine related incidents. Up to this point, both jurisdictions rely on the manual gleaning of meth incidents from crime and arrest reports to identify meth-specific legal transactions. Monthly arrest data have been made available to the evaluators. For ease of presentation, however, arrest data for 1998 and 1999 are presented in Exhibit 4. These data include information on arrests, drug seizures, and clandestine lab seizures made by the Street Narcotics Unit of the LRPD, the Little Rock Special Narcotics Operations Unit, and the Pulaski County Sheriff's Department. The Little Rock Police data are based on number of charges rather than the distinct number of individuals charged. The Sheriff's Department data are based on number of arrestees. Thus, these data are not comparable across agencies. Accordingly, interpretations of the data should be confined primarily to assessments of intra-departmental changes in police activity between 1998 and 1999.

Exhibit 4: Measures of Police Activity Involving Methamphetamine, Little Rock Police Department and Pulaski County Sheriff's Department, 1998-1999

	Little Rock Street Narcotics Unit		Little Rock Special Narcotics Operations		Pulaski County Sheriff's Department	
	1998	1999 (thru August)	1998	1999 (thru August)	1998 (thru Sept.)	1999 (thru Sept.)
Felony Narcotic Arrests	1,153	1,040	311	213	227 (total narcotic arrests)	373 (total narcotic arrests)
Misdemeanor Narcotic Arrests	319	214	40	17		
Attempted Manufacturing Meth	19	29	5	1	0	5
Manufacturing Meth	23	54	0	0	4	42
Possession of Ephredine	11	67	0	2	0	23
Possession of Meth	16	14	1	1	18	37
Possession of Meth with Intent to deliver	58	94	41	6	17	67
Meth Delivery	0	0	0	0	3	1
Total Meth Arrests	127	258	47	10	42	175
Meth Seizures (in grams)	7,299	4980	8,476	522	64	722
Meth Labs Seized	18	41	8	1	3	40

These data indicate that police activity involving enforcement of methamphetamine statutes picked up dramatically between 1998 and 1999 for both agencies. While the Little Rock PD includes only eight months of 1999, the total volume of meth arrests doubled compared to 1998 and the number of labs seized more than doubled. Increases are even more pronounced for the Sheriff's Department where meth arrests more than quadrupled and lab seizures skyrocketed from 3 to 40 between the first nine months of 1998 compared to the first nine months of 1999. In 1999, meth cases comprised almost half of the narcotics arrests within the Sheriff's Department (46.9%). The comparable figure for the Little Rock PD was 20.5 percent. These data clearly indicate a dramatic and rapid increase in meth arrests and interventions for both agencies since the Methamphetamine Initiative commenced.

The departments are planning a data link through the use of shared jail and arrest records that will promote interagency cooperation in the application of methamphetamine enforcement. The goal is to have a data link-up and server to provide intelligence and mapping services, to identify "cookers" known in the area, and to help coordinate activities of the various narcotics divisions across departments. It is felt that information sharing will help solidify the currently positive relationships between the two narcotics units and promote a coordinated approach to a "regional problem." It is also believed that the information sharing will transcend the issue of meth, and that positive spillover effects will be large. This is a major focus of the entire meth initiative in Little Rock. Notwithstanding this focus, the desired data linkages have not yet been established. However, officers from each department are now working together in developing standardized data collection forms which contain valuable meth-specific information.

Street-Level Markets and Enforcement Efforts

Police respondents indicate the distribution method of methamphetamine has limited enforcement efforts to uncover suppliers. As noted previously, street narcotics officers say that meth is usually distributed among groups of users who frequent the same party circles at local dance clubs and bars. As one Little Rock Police officer relates, "with crack we saw a recipe come in from the west coast...the sales mechanism for methamphetamine is different."

The fact that the local meth market is very distinct from other local drug markets, especially crack, presents major issues for street-level narcotics officers. The social organization

of narcotics enforcement is geared to production/distribution/ and use patterns unrelated to those found with meth. This was illustrated by ride-alongs of the evaluator(s) with narcotics officers. On two separate occasions, the ride-alongs had little relationship whatsoever to meth, despite adequate prior notice about the visit. Houses/locations where labs were had been discovered were pointed out, but there was little indication that officers had specific knowledge of current meth locations. This suggested that meth is not central to pre-existing narcotics enforcement in the area, which appeared to be traditional, aggressive, and high visibility enforcement in selected “hot spot” areas.

The Little Rock PD narcotics officers reported that meth tends not be present in most of Little Rock. On the other hand, deputies from the County Sheriff’s Department and officers from the North Little Rock PD indicate they come across meth frequently, and that clandestine labs are commonly encountered, primarily through the use of informants and citizen complaint.

Precursor Drugs

A major aspect of local enforcement efforts is to disrupt transactions involving the acquisition of precursor drugs. Most local retailers were reported as being sensitive to large ephedrine sales and have hired security who will report large sales. But there are no regulations or laws requiring reporting. In Little Rock, there’s one mom/pop type pharmacy that has been selling cold medicine to cooks by the case. This is a well-known situation, but it has not been stopped because there is no legal authority to do so. But narcotic officers are working with local prosecutors to file a conspiracy charge against the pharmacy owners. They will be told that their sales result in meth production and if they don’t stop, they will be charged. All respondents acknowledged the need to better communicate with retailers about meth issues, and to promote either voluntary self-restraint or to engender compliance with legal threats. To date, these approaches appear more fully developed by the Pulaski Sheriff’s Department than the Little Rock PD.

The Sheriff’s Department has printed up cards identifying precursors. These cards have been distributed to retail outlets. The result has been calls in which purchasers and their license plates have been reported. Some independent convenience stores have not been very cooperative, however.

Police Officer Training

The Little Rock PD has established an in-service meth training program. The goal is to educate all sworn officers (N = 500) in an eight hour training session. As of January 13, 2000, about 275 officers have gone through the training, held at the LRPD Training Academy. The initial focus has been placed on training COPP officers. Subsequent phases have focused on training patrol officers. The training is provided by narcotics officers who have gone through DEA School. Observations of training sessions during the December 1999 site visit indicate a very professionally administered and informative training process, which should be effective in providing officers with needed information so that officers can effectively communicate with the general public about the nature of meth and the hazards it poses.

A four-hour training program has been incorporated into Academy training for new recruits.

The Sheriff's Department has put on 1-3 hour meth training sessions for most departmental personnel, including jail staff. They are now also training staff from municipal policing agencies in Loanoke County, where a lot of meth production is going on. They feel these efforts have generated many more officers recognizing meth situations because arrests and seizures increased dramatically after the training sessions.

Treatment

The former Coordinator for Community Programs in the City of Little Rock reported that the treatment oriented program originally submitted for the methamphetamine initiative grant (\$250,000) was honed down dramatically the COPS Office (to \$50,000). Thus, the treatment component of the initiative is quite limited. Moreover, as of December 1999 there was no established plan on how to provide treatment to methamphetamine abusers under the initiative. Funds for this purpose have not yet been utilized. It was only during the December site visit that Little Rock PD staff had face-to-face contact with the Drug Court Judge. In the original grant proposal, drug court clients abusing meth were identified as likely targets of intervention under the initiative. But animosities between the relevant parties and strong concerns about the quality of treatment services provided drug court clients in Little Rock indicate the meth

initiative must find alternative approaches to deliver treatment services. Remaining options include:

- Provide services through a pre-existing adolescent and women's program and target abusers who use meth as the drug of choice. Use standard treatment services.
- Develop a separate contract with a treatment provider to specifically deliver meth treatment to some, as of now, unidentified meth abuser population.

Despite funding inadequacies, some discussion has taken place on providing residential treatment services for a small number of meth. City counsel has been brought in to advise the Police Department on how the funds can be lawfully distributed to treatment providers and a solicitation has been developed.

The Pulaski County Sheriff's Department does not have a treatment or identification/referral plan in place for methamphetamine abusers confined within the county jail. Overall, meth-specific treatment services for abusers in Little Rock are not very well-developed, and it appears that the COPS methamphetamine initiative will do little to improve the situation.

Prevention

Prevention efforts were nearly non-existent until the hiring of a Program Coordinator in July 1999. With a background in community-based treatment and program administration, her efforts have focused on community outreach and awareness programming. A public education campaign has emerged.

A major feature of the effort is a billboard campaign. A contract with a local billboard company has been executed (\$23,000) which involves one billboard at a time being displayed which communicates the danger of meth and presents phone numbers for the LRPD and the PCSD. The locations of the billboards will rotate every 6-8 weeks across the county. Two templates have been developed, with each one being rotated every six months.

The Program Coordinator has developed a series of brochures and pamphlets (reading level up to the sixth grade) for widespread distribution throughout the county. These information sources will be available at community centers, neighborhood police centers, and at community meetings sponsored by COPP officers. The first order of brochures/pamphlets cost \$3,000.

An electronic mass media campaign is also underway. This involves a collaborative partnership with a local television station to run a 25 second PSA, which has already been produced. The local cable access station has already been running the PSA. The Coordinator has done a number of morning TV interviews, as well as radio interviews and news talk programs.

A bus advertisement campaign has also been initiated. This involves “meth ads” being placed on the sides and back of local buses. The buses featuring the ads will be rotated by route, to maximize citizen exposure to the ads. The cost is \$12,000 per year. The cost has not yet been approved by the Police Department and city officials.

Other aspects of the public awareness campaign include introducing a meth component into a local cable program run by a community policing officer and utilizing a newly-hired Neighborhood Watch Coordinator in the public education campaign. These efforts have not yet commenced.

Another major feature of the public awareness/education program involves community presentations made by COPP officers. As of January 13, 286 civilians have received training on the methamphetamine situation. This involves the viewing of videotapes that show the aspects of the manufacture, distribution, and use of methamphetamine. Community members are also presented with pamphlets, hot line numbers, and other information to promote education and awareness.

Community Policing

The community policing initiative within the city of Little Rock has had little overlap with the methamphetamine problem up to this point. According to one COPP officer in the Little Rock Police Department, he has not seen a lot of methamphetamine within the neighborhoods where community policing has been implemented.

The community policing program that was implemented within Little Rock in 1992 consists of 15 satellite stations (ALERT Centers) and bicycle patrols, predominately located within African-American neighborhoods. There are 39 COPPs and four Sergeants assigned to the unit, and they focus their long-term assignments to particular neighborhoods on assessing and responding to community needs as gleaned through community meetings. The consensus among

the law enforcement personnel of Little Rock is that the geography and the demographics of the methamphetamine problem do not overlap with the community policing initiative.

COPP officers in Little Rock are reported to not be in contact with meth issues. When a COPP officer identifies a drug issue, s/he will communicate with the narc unit about the problem, but there is no structured communication flow between the units. While the training of COPP officers about meth was slow to be implemented, most officers have now received the training. The goal is for COPP officers to incorporate information on meth in their public speaking activities. School resource officers will do the same in the local schools. These efforts were scheduled to commence in January 2000. The LRPD has developed a form indicating how many people have been reached, and the nature of the presentation. The Sheriff's Department has been doing this for a while now (since July 1999) and data provided to the evaluator indicates that as of Nov. 4, 1999 34.5 hours of meth awareness training has been provided to a total of 385 citizens.

Other Issues

Other issues that have arisen during a recent site visit include 1) an impending budgetary shortfall for the City of Little Rock, which is feared may result in budget cuts to the LRPD and 2) a hiring process that is underway to hire a new Police Chief. Concern has been raised that these two situations may negatively impact the methamphetamine initiative.

The Meth Initiative in Minneapolis

**Ed McGarrell
Kip Schlegel**

Introduction

The Minneapolis Anti-Methamphetamine Initiative is under the direction of the Minneapolis Police Department (MPD). The task force is comprised of the MPD along with nine other agencies: The Hennepin County Sheriff Department, the St. Paul Police Department, the Ramsey County Sheriff Department, the Hennepin County Prosecutors Office, the Minneapolis Pollution Control Agency, the Minnesota State Patrol, the Drug Enforcement Agency and the Minneapolis Health Department. The Initiative focuses on four primary activities: 1) Training. 2) Education/prevention. 3) Enforcement/Intervention and 4) Research. The evaluation of this initiative includes the collection of data on enforcement/intervention activities, site visits and interviews with members of the task force concerning the four primary activities, interagency relationships and assessment of impact on methamphetamine (meth) use and distribution.

History

The Minneapolis/ St. Paul metropolitan area encompasses approximately 500 square miles and 3 million people. The MPD recognized early that meth use was a small but growing problem in the metro area. Drug enforcement activities revealed two primary sources for meth in the area. The largest source involved the shipment of meth from Mexico by Mexican Nationals to local Hispanic communities in the city and state. The second source of meth came from small local rural labs operated by loose networks of young white males, often including, but not limited to bikers. These labs are small and portable, making discovery and intervention difficult. Within the Minneapolis/St. Paul metropolitan area, meth sales and use was more prevalent in the St. Paul area, largely because of the “blue-collar” bars in the vicinity. Meth was also found in the rural and suburban areas surrounding the Twin Cities.

Organizational Structure

Understanding the context in which the Minneapolis anti-meth initiative operates is complicated by the wide array of enforcement agencies currently engaged in narcotics enforcement in the metropolitan area. In addition to the 10 agencies that formally participate in the initiative there are currently three Multi-jurisdictional Drug Task forces (the Northwest Metro Drug Task Force, the South Metro Drug Task Force and the South Valley Metro Drug Task Force) operating in the area. In addition to these multi-agency enforcement efforts, the Airport Police, the Bloomington Police Department, the Champlin Police Department, the West Hennepin Department of Public Safety and the Minnesota Gang Task Force are also involved in narcotics enforcement and have submitted methamphetamine seizures to the lab. Finally, within the Minneapolis Police Department itself, there are decentralized narcotics officers, known as CRACK Teams, working within Community Response Teams (CRTs). These teams engage in proactive, neighborhood level enforcement activities in the five precincts in the city. While most CRACK teams are a part of the CRT Teams, several CRACK teams now operate independently and are no longer associate with the CRTs. At this point in time it is unclear how the anti-meth initiative works in conjunction with these other enforcement efforts. This will be a focus of data collection in upcoming site visits.

Partnerships

Relationships between law enforcement agencies in the Minneapolis and St. Paul metro areas appear to be improving. The first site visit did not indicate much cooperation between the MPD and the St. Paul Police Department. However, a change in personnel in the SPPD narcotics unit has led to increased cooperation between the two agencies.

Similarly, the MPD and the Bureau of Criminal Apprehension (BCA) have taken a creative approach to providing training statewide. The COPS' initiative was used to develop the training materials and to provide the training at no cost to the partnering agencies. BCA has separate funding that allows for it to be provided to law enforcement, firefighters, and EMS personnel throughout the state. There has been considerable interest in training from agencies outside the metropolitan area. Currently training is scheduled for Rochester, New Alm, Fergus Falls, and Duluth.

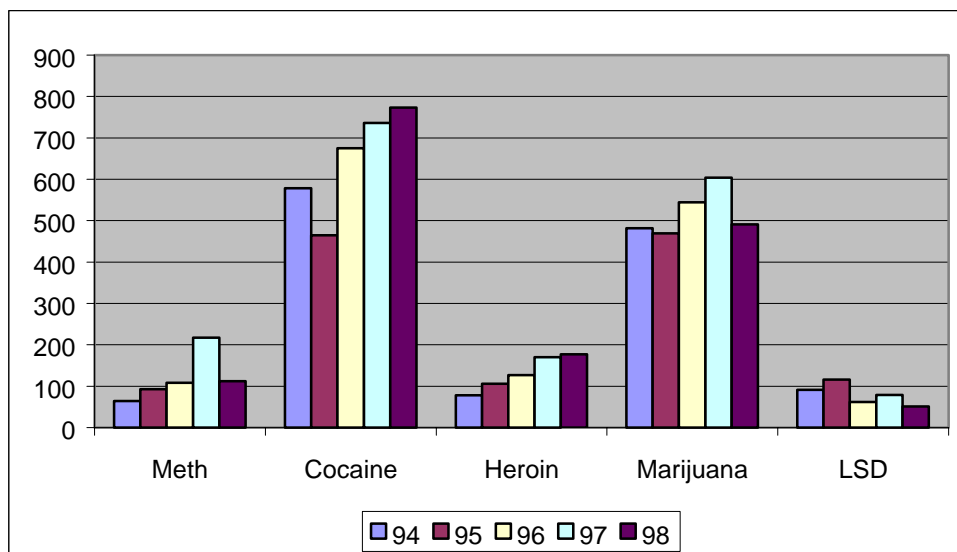
Drug Market Dynamics

Meth is considered a small but growing element of the region's drug problem. The perception is that distribution has moved away from biker groups toward the major distribution from Mexican Nationals. There are also reports of small, "mom and pop" labs being discovered in the metro area. Narcotics officers believe that most of the cooking occurs in rural areas of the state.

The available data support the description of meth as a small but growing problem. There was a clear increase in all indicators during 1997. The picture is more mixed since that time. Emergency room mentions and overdose deaths declined in 1998 and 1999 but law enforcement indicators continued to increase.

Meth emergency room mentions increased significantly in 1997, more than doubling over prior years (see Exhibit 1). During 1998, however, meth emergency room mentions declined. Similarly, treatment admissions doubled from 1996 to 1997 but the 1998 and 1999 rates declined from the 1997 peak.

Exhibit 1: Emergency Department Mentions of Selected Drugs



Source: Drug Abuse Warning Network (DAWN), office of Applied Studies, Substance Abuse and Mental Health Services Administration (7/99 update); provided by Falkowski (1999).

Consistent with interviews conducted in Minneapolis, and national data, the profile of meth users appears quite distinct from cocaine users. Whereas over half of the cocaine users admitted to treatment in Minneapolis were African American, nearly all the meth users were white (see Exhibit 2). Over one-third of those admitted for meth were under the age of 25. This compared to 11 percent of cocaine users. Although most users reported sniffing and smoking meth, one-quarter reported injecting.

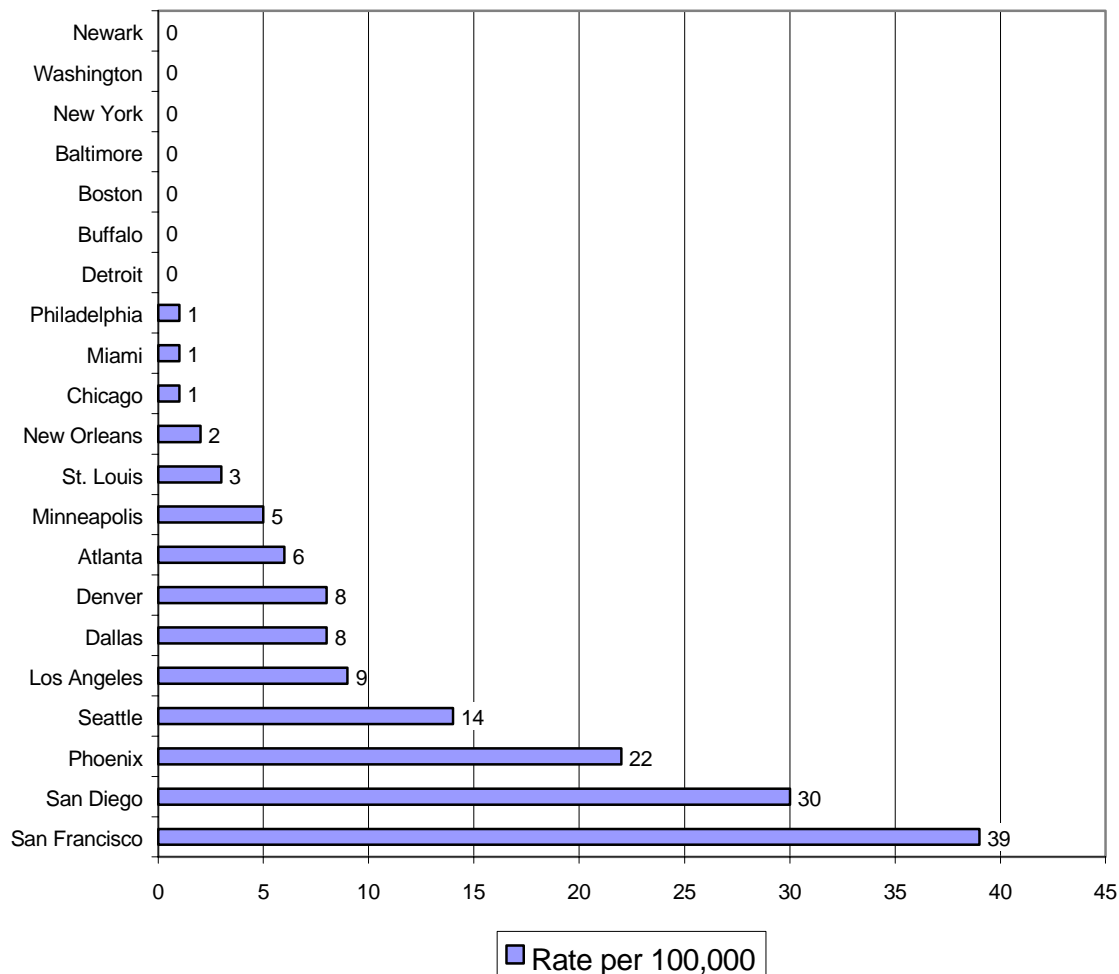
Exhibit 2: Characteristics of Persons Admitted to Treatment in Minneapolis/St. Paul in 1999 (1st half) by Primary Drug

	Cocaine	Methamphetamine
Total admissions	N=1175	N=175
Gender:	percent	percent
Male	67.6	70.3
Female	32.4	29.7
Race/ethnicity:		
White	37.3	96.7
African American	54.4	1.3
Hispanic	3.4	0.7
American Indian	3.2	0
Asian	0.1	0
Age:		
under 18	2.1	4
18-25	9	33.1
26-34	37.2	32.6
35+	51.7	30.3
Administration route:		
Smoking	84.4	17.6
Sniffing	13.1	48.7
Injection	2.4	26.1
Other	0	7.6
Secondary drug	55.9 (alcohol)	40.8 (marijuana)
Tertiary drug	43 (marijuana)	44.1 (alcohol)
1st treatment	21.8	26.7
Daily nicotine use	69.8	69.7
Job is primary income source	51.6	58.2

Source: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Minnesota Department of Human Services, 1999; provided by Falkowski, 1999.

Examining national emergency room data places the Minneapolis meth situation into context. As Exhibit 3 illustrates, meth admissions are considerably lower than in metropolitan areas in the western half of the United States. Yet there is evidence, consistent with practitioner reports and other data sources, of a meth problem.

Exhibit 3: Race of Methamphetamine Emergency Room Mentions by Metropolitan Area (1998)



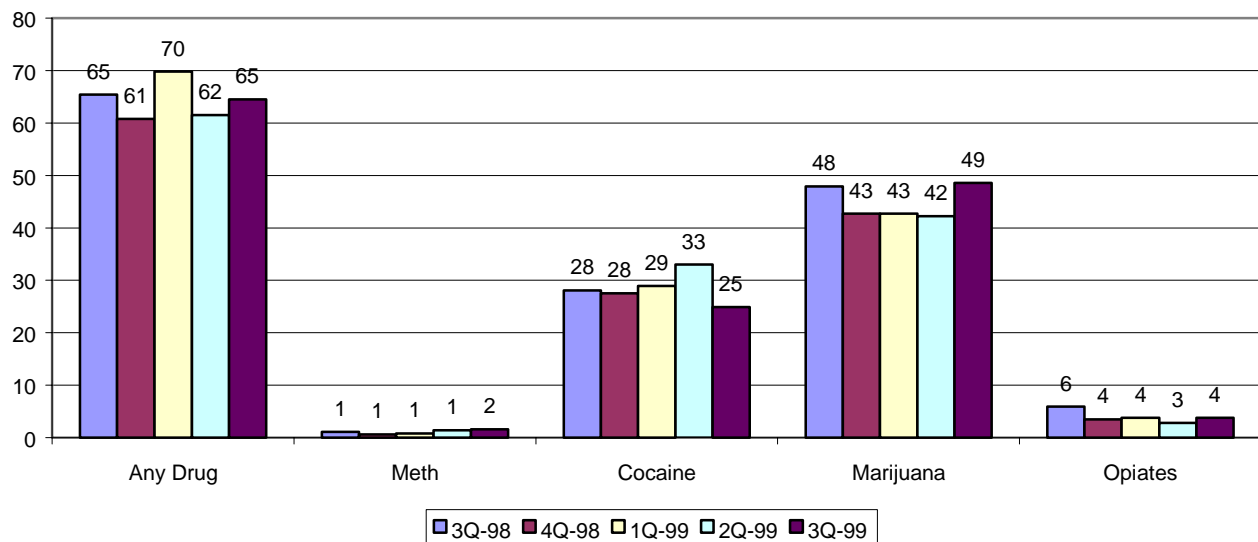
Source: Drug Abuse Warning Network (DAWN), Office of Applied Studies, Substance Abuse and Mental Health Services Administration (7/99 update); provided by Falkowski (1999).

In 1997 there were 22 meth labs seized (statewide). In 1998 this increased to 46. Through December 6, there had been 97 lab seizures during 1999. During 1998, prices for meth were reported to be \$100 per gram and approximately \$1000 per ounce (Falkowski, 1998). This remained relatively constant during 1999: \$100 per gram, \$900 per ounce, \$10,000-12,000 per pound (Falkowski, 1999).

The ADAM program began in Minneapolis in 1998. Data were collected for the third and fourth quarters and have continued since that time. Less than one percent of arrestees tested positive for meth. Eighteen percent of the males admitted to lifetime use of meth. Less than four percent of females admitted meth use (See Exhibits 4 and 5; NIJ, 1999). During 1999, the proportion of arrestees testing positive increased slightly to 1.4 percent of males and 0.8 percent of females.

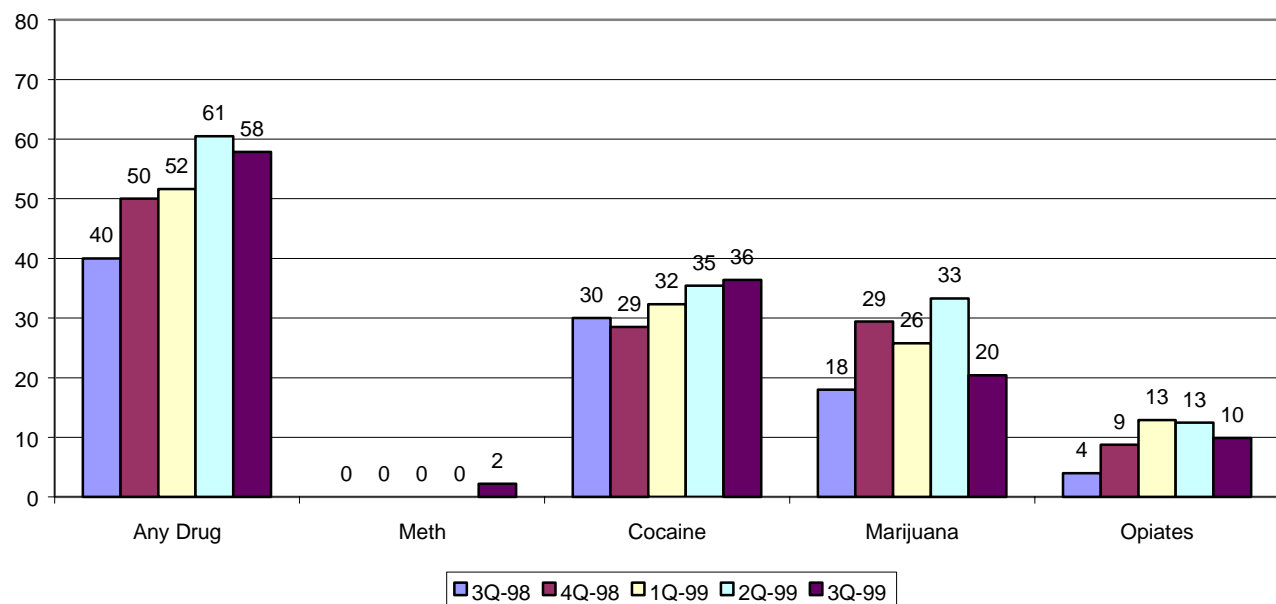
On the basis of interviews with narcotics officers during a second site visit, methamphetamine appears to be increasing in the area. Whereas it used to be confined to particular areas of the city they are “now finding it all over the place.” This being said, the officers do not consider meth to be a common street drug, noting that crack cocaine and marijuana are more widely available in the city. Rather, meth tends to be sold in relatively closed networks either in bars or through friends. For the most part meth is brought to the officers’ attention through informants and they are finding it distributed largely through Hispanic groups and families that have typically been involved in cocaine distribution. For example, last year they made a number of arrests of a Hispanic family of 15 involved in high volume distribution of meth. This group had been involved in cocaine and crack distribution but had learned how to make meth and take advantage of the profit potential involved with it. In Mexico a pound of meth can be purchased for approximately \$3,000 and sold in Minneapolis for \$14-\$15,000.

Exhibit 4: Drug Use Among Male Arrestees in Minneapolis



Source: Arrestee Drug Abuse Monitoring Program, National Institute of Justice, 1999; provided by Falkowski, 1999.

Exhibit 5: Drug Use Among Female Arrestees in Minneapolis



Source: Arrestee Drug Abuse Monitoring Program, National Institute of Justice, 1999; provided by Falkowski, 1999.

Intervention

The Minneapolis metropolitan area is characterized by multiple narcotics enforcement efforts with as many as nine different narcotics task forces, the MPD narcotics unit, the St. Paul Police Department narcotics unit, the Hennipin County Sheriff's Department, the FBI, and DEA, each working narcotics cases in the area. In addition, the MPD has a number of district-level Community Response Teams (CRTs) involved in undercover operations in the city of Minneapolis. Once a week Lieutenant Isaac Delugo of the MPD and the Anit-Meth Manager, along with members of the East and West task forces, the Airport Police, DEA, FBI and 10 officers from his own unit assigned to different area task forces meet to discuss current investigations and to decide whether particular cases merit joint investigative efforts.

Unlike the CRTs, which respond to citizen complaints and focus on a variety of problems from crack houses to prostitution, the MPD narcotics unit has focused on long-term investigations using traditional undercover techniques.

Narcotics officers reported that they were each involved in 2 to 3 active cases and about half of those involved meth. They noted that they used the same enforcement techniques with meth as with other drugs and that they worked regularly with other task forces in the area and had a very good relationship in particular with the Hennepin County Sheriff's Office. They also noted that they tried to make cases that could be taken federal court in light of the stiffer sentences in the federal guidelines. One problem they encountered however was that they were seeing more cases where amphetamine were being sold as methamphetamine. This poses a particular problem because the sentencing guidelines have no special provisions for amphetamine as it does for meth, where possession of 500 grams or more carries a 5 year sentence. The maximum federal sentence for amphetamines is 36 months.¹

Laboratory Activities

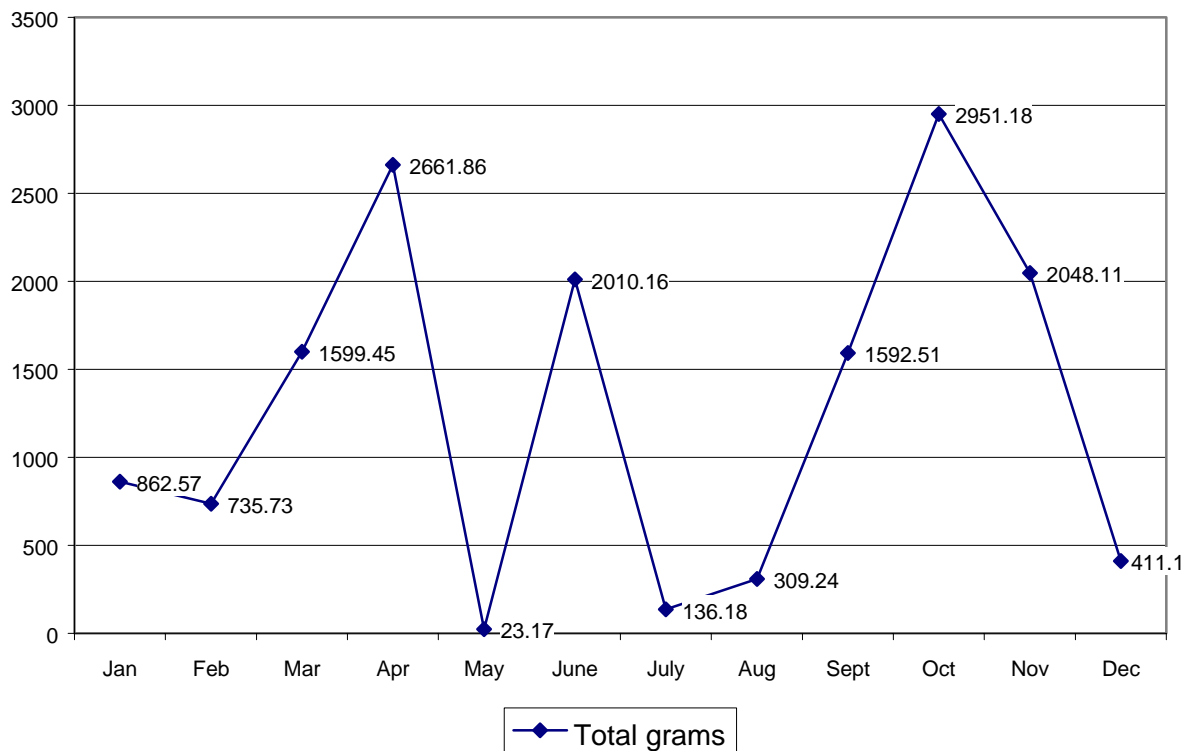
The Minneapolis Health and Family Support Department Laboratory has been in existence since 1895 and began systematic drug testing in the late 1960s. The Lab conducts about half the drug tests in the metro area, sharing responsibility with two other labs—the state

¹ The sentence ranges are based on the perceptions of the narcotics officers.

Bureau of Criminal Apprehension and the St. Paul Police Department. The lab services approximately 60 agencies and conducts all the tests for the MPD and the Methamphetamine Initiative. They noted that they do not receive information from any other of the labs, nor do they think they see all the meth in the county. They are unlikely to have complete information given that the drug court does not require drug testing, drugs will not be tested if attorneys do not protest or if the police rely on their own trace tests.

In terms of methamphetamine, they noted that when they do test it they tend to get the entire seizure. While they have seen meth at the Lab at least for the past 10 years there has been a definite and substantial increase recently. Meth seizures tested in the lab increased from 26.9 pounds in 1997 to 70.2 pounds in 1998. They noted, for example, that they had six cases that included one pound of meth each and one case of one pound of amphetamine.² They noted that they began to see an upturn in meth in the area approximately three years ago when they began hearing about it—particularly in the south metro area. While it has been prevalent in the biker population for some time it has spread in other areas of the city. Crack continues to be the drug of choice in the inner city but there is evidence of an increase in low-purity level cut meth, again, in the southern suburbs. Pure white meth is relatively rare—most meth is cut with Dimethylsulfon that is available through veterinarian offices for arthritis in animals, and in some industrial solvents. They noted that they do not recall seeing crystal meth and while they have seen a few cases of heroin, Ecstasy, and some GHB submissions, the predominant drug is cocaine. They did note an increase in Chat, a plant legal in Somalia but a controlled substance here. They attribute this increase to the growing Somalian population.

² They report that amphetamine and methamphetamine are very similar, differing only in the precursor or starter drug (norephedrine or norpseudophedrine vs. ephedrine or pseudophedrine).

Exhibit 6: Meth Samples Tested in Lab, Total Grams

Source: Minneapolis Health Department Laboratory

Exhibit 6 presents monthly lab data for 1999. The figure indicates significant month to month variation but also that there seems to be a steady flow of meth samples to the lab. During 1999 there were 111 separate meth cases submitted to the lab. Just over one-quarter of the cases and nearly one-third of the samples were from the Minneapolis Police Department (see Exhibit 7). The remainder were from the variety of task forces serving the Metropolitan region, the sheriff department, and several other law enforcement agencies (see earlier discussion of the structure of drug enforcement in Minneapolis).

As is evident in the attached data on testing of meth seizures, there is significant variability in purity levels. They attribute this to the point in the distribution chain where the seizure occurs. High purity levels tend to indicate locally cooked meth that has not been cut. In contrast, lower purity levels tend to indicate meth being imported from Mexico that has been cut. These low purity samples comprise 75 percent of the total samples.

Exhibit 7: Data on Meth Samples Submitted to Minneapolis Health Department Lab, 1999

Total cases submitted to lab	111	100.0
MPD cases	31	27.9
Total meth samples	354	100.0
MPD samples	108	30.5
Total grams	15341	100.0
Grams per month	1278.4	
Grams per case	43.3	
Purity*		
Samples 75-100% purity	39	11.1
Samples 50-74.9% purity	17	4.9
Samples 25-49% purity	30	8.6
Samples 0-24.9% purity	263	75.4

*The total number of samples for which purity data are available do not total to the total number of samples due to a small number of cases that did not provide reliable purity data.

Source: Minneapolis Health Department Laboratory

Treatment

There are no treatment components to this particular initiative. There is, however, a new drug court and we will monitor available treatment.

Prevention

The Minneapolis Initiative focuses on both education and training. Each will be discussed briefly.

Education

The education component is taking what is described as a “train-the-trainer” approach in which school officials are learning about meth. The hope is that these individuals will be able to educate others about meth and be alert to signs of meth abuse within the school population. The training is geared toward school health teachers, chemical health specialists, school nurses, school liaison officers (MPD), and alternative school staff.

The first training took place on April 2, 1999. There were approximately 35-38 attendees. The course included a focus on marijuana in the morning and meth in the afternoon. The information presented included local data on use of meth and other drugs, behavioral

characteristics of meth users, presentations on identifying meth and related chemicals and materials, and similar issues. A list of attendees is maintained and course evaluations are administered. They are in the process of developing a 12 minute video presentation to be made available to the schools.

Training

The main achievement to date has been the development of an ambitious training program. MPD has developed a four-hour training program for first responders and an eight-hour training program for investigators. The training component was developed by a Training Team convened by MPD. The four-hour training session covers topics such as the scope of clandestine laboratory hazards, understanding the cooking process and toxic effects, dangers to first responders, employee health and safety, medical screening and chemical monitoring, clean-up activities and community awareness. The eight-hour session also includes topics on legal issues related to liability, enforcement issues on investigation and prosecution, hands-on experience at a mock lab and the role of various agencies.

The group also developed very sophisticated and professional training materials. These include a background paper on meth and folding brochures on identifying meth precursor chemicals and lab materials, procedures to follow when potential labs or materials are discovered, vehicle stop procedures, and related matters.

The group also decided to develop a training video on traffic stops. This was based on several recent incidents in which officers making traffic stops stumbled on "TOTE Bag Labs" in which meth chemicals are found in a vehicle stop. The video focuses identification of chemicals and materials and procedures to follow.

MPD's goal is to train all sworn staff. Most will attend the four-hour session with investigators attending the eight-hour session. The training is also being extended to firefighters, ambulance staff, and law enforcement personnel throughout Minnesota. The eight-hour session has also included prosecutors and personnel from the Pollution Control Agency.

The four-hour training began on April 5, 1999. The eight-hour training began on April 20, 1999. To date, 875 officers, investigators and first responders have attended the mandatory

basic meth training session in Minneapolis. Each session includes 30 to 40 attendees with half the sessions open to partner agencies. Officers from DEA conduct the training. In addition, MPD and the Bureau of Criminal Apprehension have partnered for “out-state” training that has taken place in New Alm, Rochester, Duluth and Fergus Falls.

The intent is to expand the training to include transit, housing, sanitation and parks employees, all who may come into contact with clandestine meth labs. The focus of these sessions will be on recognition of meth labs and response (who to call) in the event that they suspect such a lab. They also hope to incorporate a train the trainer method to educate block clubs on the identification and dangers of meth. They are currently involved in a billboard campaign which will include a contest for students to design a display that will then be posted on billboards throughout the city.

The training brochures developed through the grant have been a big success. In fact, the Federal Law Enforcement Training Center has ordered 200 brochures to be used in their own training courses.

The team that has developed the training for MPD noted that a bi-product of the grant has been much closer working relationships between MPD, DEA, BCA, SPPD, and the Fire Marshal.

Community Policing

It is unclear whether the connection to community policing efforts is a conscious goal of the grant implementers. On the other hand, the project includes clear efforts to build partnerships with a variety of community agencies. Additionally, the group discussed several potential activities that would involve community policing approaches.

On the other hand, there appears to be somewhat of a disconnect between the centralized narcotics unit and the decentralized precinct narcotics officers. It will be interesting to learn whether the decentralized narcotics officers are brought into this project.

The relationship of MPD with the County Health Department is an entirely new one. The data collection by the lab, the research component, and the community education effort all reflect the new collaboration. As noted above, the community education component is focused on the schools. Attendees in the educational program include MPD school liaison officers.

The group discussing future training and education also discussed the possibility of having community safety officers provide presentations on meth to the city's Block Clubs (Neighborhood Watch Program).

Other Issues

Research Component

The Minneapolis Project also includes a research component. Although the original plans have been modified, the lead researcher has developed a three-phased research plan. The first phase involves collecting data from interviews with all offenders coming through drug court judicial review for a two-week period. Approximately 200 individuals will be interviewed in both day and evening sessions. The interviews will consist of open and closed-ended questions, much of it modeled on the ADAM meth addendum.

The second component includes interviews with adult offenders on conditional release during their mandatory visit with their probation officer. This will take place during two, two-week periods and will include individuals on probation for drugs and non-drug offenses. It is not clear how many of these individuals will have been involved directly with meth, but interviewing these probationers should provide information from a wide array of sources regarding the extent and nature of the meth problem in the area.

The third phase of the research will include interviews with homeless teens in conjunction with Project Off Street, a drop-in facility for homeless teens that provides food, shelter, and classes on teen parenting skills. These interviews will be conducted face to face and will focus on homeless teens' perceptions and possible use of meth. One rationale for this survey is that homeless teens are believed to be likely users of meth. The belief is based on anecdotal reports of use among this population and the thought that it takes great energy to work the streets and, consequently, these youths may use meth to support their street activities. The research team is interested in whether and how much these teenagers depend on drugs, particularly stimulants, to help them cope with life on the street.

As of March 2000, two rounds of interviews with drug court clients and probationers as well as a round of interviews with homeless teens have been completed. The data are currently being analyzed and will be shared with the National Anti-Meth Initiative Evaluation team.

Summary of Grant-Related Activities

Exhibit 8 summarizes the main activities initiated under the COPS grant in Minneapolis. As the Table indicates, the planned activities have either been implemented or are being initiated. The research team will monitor these activities and gather additional information about the activities during 2000.

Exhibit 8: Summary of Anti-Meth Grant Activities, as of March 2000

Activity	Comment on Status
Research:	
Lab Study - Minneapolis Dept. Health	Initiated 1/1/99
Meth survey	Revised – survey of drug court clients and drug-related probationers completed and data currently being analyzed; interviews with homeless teens completed and data being analyzed
Education:	
Meth prevention Education in schools	Curriculum developed and first session conducted 4/21/00
DARE America – Request meth component	Being developed need to verify status
National Guard Resistance Training	Being developed need to verify status
Expansion National Guard training to metro area schools	Being developed need to verify status
Training:	
Development training curriculum and materials	Completed
Schedule training	Completed (and ongoing for future training)
Deliver training	Completed and ongoing, 4- and 8- hour courses
Enforcement:	
Wire-taps	Have been initiated on several investigations
Equipment	Nextell phones purchased and operational; need to update other equipment status
Drug canines	4 dogs trained February and now deployed by MSP
Hennepin County Prosecution Record Tracking System	Underway but need to update status
Meth lab clean-up	Ongoing, MPCA part of grant task force
